

AMERICAN ASSOCIATION OF UNIVERSITY WOMEN OF ANNE ARUNDEL COUNTY WOMEN TO WOMEN AWARD APPLICATION - 2024

MAIL THIS FORM TO: **Suzanne Furr**
 4433 Windsor Farm Road
 Harwood, MD 20776

OR EMAIL TO:
 WTWofAAUW@gmail.com

FORM CAN ALSO BE FOUND ONLINE AT: <http://annearundelcounty-md.aauw.net/scholarships/>

DEADLINE FOR SUBMISSION: **Friday March 22, 2024 @ 5:00 P.M.**

INTRODUCTION:

The AA County Branch of the **American Association of University Women (AAUW)** shares in the mission of its national group, founded in 1881, and holds as its primary mission the *advancement of equity for women and girls through advocacy, education and research*. As part of our local branch work, we offer the "Women to Women Awards Program" that provides several small educational awards to Anne Arundel County, MD women and girls to improve their access to careers through training, education and/or skills development.

The number of award recipients will be based on available funds.

- All award applicants must submit a **timely and complete application and transcript by 3/22/24.**
- Applicants who are being considered for an award will be invited for a personal interview.
- Award amounts vary and are limited to a maximum of \$2,500.
- AAUW will directly pay awards to the school/service provider in the name of the award winner.
- Award winners will be notified of the outcome through electronic mailing and be presented the award at a luncheon to be held on May 11, 2024.

PLEASE TYPE THIS APPLICATION

I. GENERAL INFORMATION

A. Full Name: _____

B. Date of Birth: _____ C. Age: _____

D. Address:

Are you an Anne Arundel County Resident?

Yes No

E. Email Address: _____ F. Phone: _____

G. High School Attended: _____ Graduated Yes No

H. Prior College/s attended - List school/s and location:

Major Pursued

GRADUATED

YEAR

No Yes

No Yes

No Yes

Indicate where you learned of the AAUW Women to Women Award:

Newspaper School Friend/Relative Other _____

II. FINANCIAL INFORMATION

A. Persons / Family Members with Whom You Reside:

FAMILY	
<input type="checkbox"/> Parents	<input type="checkbox"/> Spouse
<input type="checkbox"/> Siblings	No.: _____ Ages: _____
<input type="checkbox"/> Children	No.: _____ Ages: _____
Other Describe: _____	

B. Check the best estimate of Full Household/Family Income:

<input type="checkbox"/> \$0 - \$25,000	<input type="checkbox"/> \$75,001 - \$100,000
<input type="checkbox"/> \$25,001 - \$50,000	<input type="checkbox"/> \$100,001 - \$150,000
<input type="checkbox"/> \$50,001 - \$75,000	
If greater than \$150,000 note amount: _____	

C. Identify **all** who will be contributing to your educational expenses for the next year:

Self Parents Siblings Spouse Children Other

D. **Annual** Cost of Your College Education: _____

Tuition: Books: Supplies: Room/Board:
Other: Explain:

E. Please list **all** additional Financial Aid Awards that you have/will apply for or anticipate for the next year:

**Please include a copy of your current transcript, if currently enrolled in school.
Unofficial copies accepted.**

III. CAREER OBJECTIVES

A. List career interests/Goals:

B. Identify the schools and programs to which you have applied in order of interest

IV. PROFESSIONAL HISTORY

Attach your Resume **OR** list your recent and/or current employment and volunteer activities for the past two years. **Please include an unofficial copy of your transcript, if currently enrolled in school.**

PLACE

DUTIES

DATES

CHECK ONE

EMPLOYED

VOLUNTEER

EMPLOYED

VOLUNTEER

EMPLOYED

VOLUNTEER

V. PERSONAL NARRATIVE

Attach or type on the following page a statement of no more than one page that describes your career and personal goals listed in Section III, why you have decided to pursue a career in your chosen field and the influence/impact that this Award will have in meeting your long range career objective.

The names of Women to Women Award recipients and their schools may be announced through press releases in local newspapers and marketing campaigns. By signing and dating the release of information below you authorize AAUW to use your name and the name of your school.

I, _____ give my permission to have my name and school identified in publications and press releases associated with the Women To Women Award offered through the American Association of University Women of Anne Arundel County, Maryland

TO THE BEST OF MY KNOWLEDGE, THE INFORMATION I HAVE SUPPLIED IN THIS AWARD APPLICATION IS TRUE, CURRENT AND VALID

PRINTED NAME: _____

DATE: _____

SIGNATURE OF APPLICANT: _____

V. PERSONAL NARRATIVE: