

**ZONTA CLUB OF JEFFERSON CITY FOUNDATION
WOMEN'S SECOND CHANCE SCHOLARSHIP PROGRAM
STUDENT APPLICATION FORM**

I hereby apply for the Women's Second Chance Scholarship to assist in the payment of my education and/or training expenditures.

THIS APPLICATION MUST BE COMPLETED INCLUDING ALL REQUESTED INFORMATION AND SUPPORTING DOCUMENTS i.e. TRANSCRIPTS, TAX RETURNS, LETTERS OF REFERENCE AND ESSAY. COMPLETED APPLICATIONS ARE DUE JULY 1, 2017.

I. PERSONAL INFORMATION

NAME: _____
Last First MI

HOME ADDRESS: _____
Street Number

City, State Zip

Home Phone: _____ Work Phone: _____ Cell Phone: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

Have you been convicted of a felony? Yes _____ No _____

NAMES AND AGES OF DEPENDENT CHILDREN:

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

II. WORK EXPERIENCE

Current Employer _____

Employer's Address _____

Name of Contact Person _____

Employer's Phone Number _____

Average Number of Hours Worked Each Week _____

III. RECOMMENDATIONS

TWO LETTERS OF RECOMMENDATION FROM NON-RELATIVES ARE REQUIRED TO BE SENT TO THE ZONTA CLUB AT THE ADDRESS AT THE END OF THIS APPLICATION.

IV. REFERENCES

PLEASE GIVE NAMES AND ADDRESSES OF TWO OTHER PERSONS WHO HAVE KNOWN YOU FOR FIVE YEARS OR MORE:

First and Last Name _____

Street Number _____

City, State & Zip _____

Phone _____ Relationship _____

First and Last Name _____

Street Number _____

City, State & Zip _____

Phone _____ Relationship _____

V. EDUCATION EXPERIENCE

Name of School _____

Street Number _____

City, State & Zip _____

Year of Completion _____ Degree _____

Name of School _____

Street Number _____

City, State & Zip _____

Year of Completion _____ Degree _____

IMPORTANT NOTE: IT IS THE APPLICANT'S RESPONSIBILITY TO FORWARD TO THE ZONTA CLUB AN OFFICIAL COPY OF HER MOST RECENT TRANSCRIPT OR GED IF APPLICABLE. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

VI. EXPENSES AND INCOME

A COPY OF THE LAST TWO INCOME TAX RETURNS (FORM 1040) MUST BE ATTACHED.

Number of Weeks in Class _____

Number of Classes in 16 week period _____

EXPENSES

Tuition & Required Fees \$ _____

Books & Materials \$ _____

Child Care \$ _____

Transportation \$ _____

Other \$ _____

Total \$ _____

INCOME

Amount you will contribute to your tuition and education expenses \$ _____

Other Scholarships \$ _____

Grants \$ _____

Loans \$ _____

Other Sources \$ _____

Total \$ _____

TOTAL EXPENSES SHOULD EQUAL TOTAL INCOME

Does your employer reimburse all or a portion of your tuition fees? Please explain.

VII. PLEASE ATTACH AN ESSAY ILLUSTRATING HOW THIS SCHOLARSHIP WILL GIVE YOU A SECOND CHANCE. ESSAY SHALL BE NO LESS THAN 200 WORDS AND NO MORE THAN 400 WORDS.

VIII. APPLICANT'S CERTIFICATION STATEMENT

I hereby state that I need financial assistance to help pay for my education and that the scholarship will be used for that purpose.

Name of School Attending or Accepted to: _____

Degree being pursued: _____ Projected Graduation Date _____

All information contained in this application is correct.

Applicant's Signature: _____ Date: _____

Send completed application before July 1, 2017 to:

Erin Wiseman/Jackie Forck
Second Chance Scholarship
Zonta Club
PO Box 106021
Jefferson City, MO 65110

If you need additional assistance, please contact Erin Wiseman or Jackie Forck at jackie@seaverandforckcpa.com.

APPLICATION CHECKLIST

Before you mail your application, please verify the following items are completed and enclosed.

- Completed and signed application
- Two letters of recommendation (The writer may mail the letter directly to the Zonta Club address above or may be enclosed with your application)
- Official copy of your latest transcript
- Copies of your completed tax return for the two latest years
- Essay

Thank you and good luck!