

## *Business Women's Association of Halifax County*

PO Box 1404, Halifax, VA 24558-1404

Email: ruthsmith24558@gmail.com

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### **2018 Scholarship Application Instructions**

Students interested in applying for a Business Women's Association of Halifax County scholarship should either download an application online at the Business Women's Association of Halifax County website ([www.halifaxbusinesswomen.org](http://www.halifaxbusinesswomen.org)), or pick up an application at the Halifax Library, South Boston Library, or at the Halifax High School Guidance Department. The Scholarship Application form should be completed, signed and returned via United States Postal Service along with the following attachments:

- 1. An autobiographical statement that includes your goals, college plans, financial needs as well as any clubs, hobbies, sports, volunteer work and work study you may have done.**
- 2. A transcript of courses completed. You must have at least a "C" average and be in good standing.**
- 3. Three reference letters.**
- 4. A recent photograph.**

Mail your completed application and attachments to be **received no later than February 28, 2018** to the Business Women's Association of Halifax County, Education Chairperson at the following address:

**Education Chairperson  
RUTH SMITH  
PO BOX 1404  
HALIFAX, VA 24558**

The Business Women's Association of Halifax County Education Committee will screen applications and the top candidates will be notified and scheduled for interviews. Please remember that **applications received after February 28, 2018 will not be considered.**

If you have any questions regarding your scholarship application or the scholarship application process, please call Ms. Smith at 434-476-6026 (home) or 434-579-1041 (cell). You may also send an email with any questions to [ruthsmith24558@gmail.com](mailto:ruthsmith24558@gmail.com).

Thank you for your scholarship application.

Sincerely,

*Ruth Smith*

Education Chairperson  
Business Women's Association of Halifax County

*Business Women's Association of Halifax County*

PO Box 1404, Halifax, VA 24558-1404

Email: ruthsmith24558@gmail.com

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**2018 Scholarship Application**

**SECTION A:**

1. Name: \_\_\_\_\_

2. Permanent Address: \_\_\_\_\_

3. Telephone Numbers: \_\_\_\_\_

4. Date Of Birth: \_\_\_\_\_

5. Email Address: \_\_\_\_\_

6. Are you a United States Citizen? \_\_\_\_\_  
Yes or No

7. Marital Status: \_\_\_\_\_  
Married or Single

8. Spouse's Name and Occupation: \_\_\_\_\_

9. Do you have any legal dependents that get more than half of their support from you? \_\_\_\_\_  
Yes or No

**SECTION B:**

10. What current educational institution are you attending?

\_\_\_\_\_

Name of School

\_\_\_\_\_

Street Address

County

City, State, Zip Code

11. What educational institutional do you plan to attend?

\_\_\_\_\_

Name of School

\_\_\_\_\_

Street Address

City, State, Zip Code

12. What level of college will you begin in the fall of 2018? Please check one.

Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_

Graduate Student \_\_\_\_\_ Other (Specify) \_\_\_\_\_

13. What will be your enrollment status? Please check one: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

14. What will be your degree/certificate? \_\_\_\_\_

What is your course of study? \_\_\_\_\_

15. When do you expect to complete your degree/certificate? \_\_\_\_\_

**SECTION C:**

<u>Enter Your Actual Expenses</u>		
	<u>Per Semester/Quarter</u>	<u>Per Year</u>
Tuition, Fees:	\$ _____	\$ _____
Books:	\$ _____	\$ _____
Living Expenses:	\$ _____	\$ _____
Other (Specify):	\$ _____	\$ _____
Total:	\$ _____	\$ _____

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**By my signature below I attest that all information supplied is complete and accurate.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Association Use Only

- \_\_\_\_\_ Autobiographical Statement
- \_\_\_\_\_ Transcript of Courses Completed
- \_\_\_\_\_ Three Reference Letters
- \_\_\_\_\_ Recent Photograph
- \_\_\_\_\_ Completed Application

<p>This application has been reviewed for the Business Women's Association of Halifax County eligibility requirements by:</p> <p>_____</p>
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