



# GFWC Florida Federation of Women's Clubs

## Scholarship Program for Women Returning to Work

A \$1,000 Scholarship

**Sallie Milner**

GFWC Florida Scholarship Chairman  
Post Office Box 2165  
High Springs FL 32655-2165  
[Scholarships@GFWCFlorida.org](mailto:Scholarships@GFWCFlorida.org)

*Revised Feb 2021*



**GENERAL FEDERATION  
of WOMEN'S CLUBS**

**GFWC Florida Federation of Women's Clubs  
Scholarship Program for Women Returning to Work**

*An investment in knowledge pays the best dividends.  
Benjamin Franklin*

The GFWC Florida Federation of Women's Clubs has a long history in support of education. During the 2012-14 administration, Pat Zazzarino Presidents project was to establish a scholarship program. The goal of the program was twofold. First, it was to raise funds for scholarships. Second, the scholarships would be awarded to women needing assistance for education to achieve their goals of becoming self-sufficient through gainful employment.

GFWC Florida will award **2 (two) \$1,000** scholarships to women returning for education to attain these stated goals. The application and recommendation forms are available on our website: [gfwcflorida.org](http://gfwcflorida.org).

For more information or any specific questions, you may contact

Sallie Milner  
GFWC Florida Scholarship Chairman,  
[Scholarships@gfwcflorida.org](mailto:Scholarships@gfwcflorida.org)

**Deadline for Receipt of Complete Application: April 1, 2021**

**Requirements:**

1. Recipient must be a Florida resident and attend an accredited Florida public college, university, or technical school as a full-time student. Extra consideration will be given to applicant with special needs.
2. The Recipients Application, Personal Statement and TWO (2) references (form on line) must be submitted on line to: [Scholarships@gfwcflorida.org](mailto:Scholarships@gfwcflorida.org)

**NOTE:** Recipients will be notified by email by *May 1, 2021*. Recipients will receive an award certificate, an award letter and a school verification form. The scholarship award will be sent to your school as soon as the School verification form is completed and authorized by the school's financial aid or scholarship department.



# GFWC Florida Federation of Women's Clubs

## Scholarship Program for Women Returning to Work

### \$1000 Scholarship APPLICATION

**Deadline for Receipt of Complete Application: April 1, 2021**

- Requirements: 1. Recipient must be a Florida Resident and attend an accredited Florida Public College, University, or Technical School as a full time student
2. Application, Personal Statement and TWO (2) References (Forms on line) must be submitted online to: [SCHOLARSHIPS@GFWCFlorida.org](mailto:SCHOLARSHIPS@GFWCFlorida.org)

#### Applicant's Information

Name

Birth date

Driver's License#

Student ID

Florida Resident

Yes

No

How did you learn about the scholarship

Home Address

City, State, Zip

Mailing Address

City, State, Zip

Home Phone

Cell Phone

E-mail

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Are you a citizen or permanent resident of the United States of America?

Yes

No

If a permanent legal resident provide **A #**

If not give status of residency, type visa, and number

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**Employment:**

Are you currently working?                      Yes                      No

If **NO**, Why not?

If **Yes**, Name of Employer

Address of Employer

Phone number of Employer

Number of years employed with  
this company

Job Title

Hours per Week

Gross Salary

Salary is paid (Pick one)

Hourly  
Weekly  
Annual

Previous Employment or  
Volunteer Work

Type of Employment

How long  
were you  
employed

Describe job held

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**Educational History (attach pages, using same format, as needed)**

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**High School** Attended

City, State

Dates Attended (Start - End)

Courses Taken/Degree Earned

Date of Graduation

GPA

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**College** Attended

City, State

Dates Attended (Start - End)

Courses Taken/Degree Earned

Date of Graduation

GPA

Other Schools/Training  
Programs (Name & Location)

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**Educational Goals**

Name of School

Program/Major

Start Date

Expected  
Graduation Date

Degree

Associate  
Bachelor  
Master  
Certificate

Have you applied to a school/  
program?

Yes      No

If **Yes**, Name and Location of  
School Applied to: Must be a  
FLORIDA Public Institution

If **No**, why not?

If **YES**, have you been  
accepted?

Yes      No

Student Number

If **NO**, Date of expected acceptance

I plan to begin school in the:            Fall 2021            Other (Explain)  
   Winter 2021  
   Spring 2022

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**What Courses are you planning to take during the 2021-2022 school year**

Course #	Course Name		
# of Credit Hours	Start Date	<input type="text"/>	End Date <input type="text"/>

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Course #	Course Name		
# of Credit Hours	Start Date	<input type="text"/>	End Date <input type="text"/>

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Course #	Course Name		
# of Credit Hours	Start Date	<input type="text"/>	End Date <input type="text"/>

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**Narrative**

We would like to get to know you better and know your plans. **Provide us with a statement that clearly describes your needs for the scholarship and address the following questions.** The narrative should be no less than two pages and no more than five pages and font size no smaller than 12. Font should be Arial, Calibri, or Times New Roman. **Include your name, email and phone number on each page. The narrative is very important to the evaluation and selection process.**

1. Describe your long term goals. Where do you see yourself in 5 years?
2. How will your educational goals enable you to get a job that will allow you to support yourself and/or family?
3. What job career is of interest to you and why?
4. What are the job opportunities for you in this field?
5. What will receiving this scholarship mean to you?
6. Do you have any special needs?

**The narrative is very important to the evaluation and selection process. PLEASE RESPOND TO ALL 5 Questions Above. All questions on the application must be answered.**

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**I understand that:**

1. GFWC Florida Federation reserves the right, at its discretion, to cancel or reduce any award without liability.
- 2, I hereby make application for scholarship aid, subject to the terms of this program, and certify that the information in this application is correct.

Signature of Applicant

Date:

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SUBMIT YOUR APPLICATION on line ONLY to: [Scholarships@GFWCFlorida.org](mailto:Scholarships@GFWCFlorida.org)  
(Mailed Applications will not be accepted)

Transcripts and a letter of acceptance from the school that you will attend may be mailed to:

Sallie Milner  
GFWC Florida Scholarship Chairman  
Post Office Box 2165  
High Springs FL 32655-2165

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**References**

Two References are required and must be submitted on line using the Reference Form for "Women Returning to Work" as well as a written statement in support of the applicant. Be sure that each reference understands that the form must be completed on line. You might consider asking for references from teachers, employers, a counselor that you have worked with or a director of a group you have volunteered for. Ask someone who knows you (but not a family member) and can comment on your abilities, desire and determination to complete your education and career goals. **Reference forms must be e-mailed by the person completing the form. they maybe emailed to [Scholarships@GFWCFlorida.org](mailto:Scholarships@GFWCFlorida.org).**