FOUNTAIN HILLS WOMEN'S CLUB SCHOLARSHIP APPLICATION

All information will be held in the strictest confidence. Only the members of the FHWC Scholarship Committee will review your application.

CRITERIA: The applicant must be a woman who resides or is employed in Fountain Hills, Arizona and who possesses a high school diploma or equivalent. The applicant must be at least 23 years of age and must desire to further her career goals through the pursuit of additional education.

PERSONAL INFORMATION:				
Name:				
Complete Mailing Address:				
Telephone Number: Home	Office	Cell		
Email Address:				
Marital Status: Single	Married	Divorced	Widowed	
Number and Ages of Children: _	Othe	Other Dependents:		
EMPLOYMENT INFORMATION	<u> </u> :			
Are you currently employed?	If yes, name of emplo	oyer:		
Address:				
Telephone Number:				
Position Held:				
EDUCATION INFORMATION:				
High School (Name of School):				
Year Graduated:	Equival	Equivalent/GED (Year Obtained):		
College/University/Trade or Voca	ational School (Name of Sc	hool):		
Years attended:				
GOALS:				
Career Goal:				
Current School/Location:				
Quarters/Semesters needed to d	complete the course of stud	y:		
Date of anticipated completion:				
Estimated educational expenses	for 22-23 academic year:			
Tuition:	Books:	Other:		

APPLICATION SUBMISSION:

Please complete the application in its entirety. With your application, please include a 500 word personal essay which tells us why you are applying for this scholarship and how it will benefit you. Return the completed scholarship application form and personal essay to: Scholarship Chair, Fountain Hills Women's Club, PO Box 18271, Fountain Hills, AZ 85269. All materials must be received by April 11, 2022 to be considered for a scholarship grant.