

Scholarship Fund of the Minneapolis Branch of AAUW  
2115 Stevens Avenue  
Minneapolis, Minnesota 55404  
(612) 870-1661

*Application Deadline - Application must be RECEIVED by February 7, 2020*

### **Application Criteria**

Female Minneapolis Resident

Graduating Senior from one of the Minneapolis Public High Schools

Educational Goal: Bachelor's Degree from an accredited 4-year institution

Minimum Cumulative GPA: 3.0

Demonstrated Financial Need

Demonstrated Ability to Handle College-level Coursework

### **The Scholarship**

Award amount: \$4,000 per year

Renewable annually for a total award of \$16,000

Renewal based on satisfactory progress as a full-time student.

Return this application together with the requested materials:

Your essay

Front page of your parents' latest tax form - 2018

Two letters of reference

And have your counselor send the verified copy of your high school transcript

Mail to:

Minneapolis Branch AAUW Scholarship Board

2115 Stevens Avenue

Minneapolis, MN 55404

Or email to: [aauwscholarship@galemansion.com](mailto:aauwscholarship@galemansion.com)

A reminder: The deadline for the receipt of your application is **February 7, 2020**

**Applicant Information**

First Name: \_\_\_\_\_ MI: \_\_\_\_ Last Name: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Marital Status (circle one): single married divorced widowed # of Dependents: \_\_\_\_\_

If other than the U.S., what is your country of birth? \_\_\_\_\_

Number of years lived in the U.S. \_\_\_\_\_

**Parent or Guardian #1**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Marital status (circle one): single married divorced widowed # of Dependents: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Highest level of education achieved: \_\_\_\_\_

**Parent or Guardian #2**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Marital Status (circle one): single married divorced widowed # of Dependents: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Highest level of education achieved: \_\_\_\_\_

**Scholastic Information**

Name of High School: \_\_\_\_\_ Grade Point Average(cumulative): \_\_\_\_\_

Class Rank: \_\_\_\_\_ ACT or SAT Score: \_\_\_\_\_

*Please ask your guidance counselor to send us a verified high school transcript.*

## **Financial Need**

Please submit a copy of the latest available front page of your parents' Federal Income Tax Form.

How many dependent children are in your family? \_\_\_\_\_

How many children in the family are currently attending post-secondary schools? \_\_\_\_\_

How do you intend to pay for your college education?

Have you already received financial assistance for college in the form of grants or scholarships?

Please list:

Please describe your economic need.

### **Educational Plans**

List the post secondary schools you are considering, in order of preference, and the dates of your applications. Note if you have been accepted to any of the schools listed.

Are you considering a particular field of study at this time?

### **School Activities**

List school activities and the years involved (e.g. student government, sports, honor society, etc.):

### **Community/Volunteer Service**

List community service and volunteer activities, include the years and amount of time involved:

### **Employment**

List jobs, most current position first, including hours per week and duration of employment:

## **Character References**

Please submit two letters of reference on letterhead stationery from two adults who know you well (teachers, counselors, volunteer supervisors, religious leaders, employers).

## **Essay**

Please submit a typed essay (2 pages maximum) on the following topic:

**How have you been influenced by the challenges in your life, and how have they affected your life goals?**