

2020-2021 Vivian Winston Scholarship Application

The Vivian Winston Scholarship was established to assist female students and allow them to improve their lives, the lives of their children and their communities while overcoming the financial challenges of the cost of both tuition and child care (if needed).

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REQUIRED DOCUMENTS & TIMELINE

Please have the below documents ready for upload before continuing with the application. Incomplete applications and/or missing required documents may disqualify applicant from consideration for this scholarship.

- The following application should be fully completed, including narrative about academic and personal goals.
- Two letters of recommendation. At least one must be from an educational professional – teacher, professor, counselor, etc.
- A current education transcript

Note: All applications should be completed online. Applications submitted directly to the WHWF office will be disqualified.

APPLICATION DEADLINE MARCH 6, 2020

FINALISTS CONTACTED BY MARCH 20, 2020

FINALISTS INTERVIEWED WEEK OF MARCH 23, 2020

SCHOLARSHIP RECIPIENTS ANNOUNCED APRIL 10, 2020

ELIGIBILITY AND APPLICATION CHECKLIST

To qualify for the Vivian Winston Scholarship, the student must meet the following criteria:

Must be able to check all to continue to application. *

- Full-time female student at EWU, Gonzaga, WSU:Spokane, Whitworth, SFCC or SCC
- Pursuing an Associate Degree, Bachelors Degree or special certification (including trade or technical)
- Resident of Spokane County while attending school
- Have dependent children requiring child care during the scholarship year
- Available to attend, as a guest, the 2020 Women Helping Women Fund Luncheon on May 19, 2020

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Applicant's Name *

First

Last

Address *

Street Address

Address Line 2

City

State / Province / Region

Postal / Zip Code

Country

Phone Number *

###

###

####

Email Address *

College planning to attend for the 2020/2021 academic school year: *

Student ID# (If available)

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There was a problem with your submission.

Errors have been **highlighted** below.

Please describe your educational experience below.

High School/GED *

Roosevelt

City Diploma/GED Received *

Fresno, CA

Year Received *

1994

Grade Point Average *

3.2

College #1 *

N/A

City College Located *

N/A

Years Attended *

N/A

Graduated? *

Yes

No

Grade Point Average *

0.0

Please enter a numeric value.

College #2 *

N/A

City College Located *

N/A

Years Attended *

N/A

Graduated? *

Yes

No

Grade Point Average *

0.0

Please enter a numeric value.

Upload Current Transcript *

Choose File

2020 VWS ...dule.pdf

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INCOME INFORMATION

Annual household income for the past year. *

Number of individuals in the household. *

Monthly rent/mortgage. *

What were your sources of income for the past year? (January-December 2019) *

- Child Support
- TANF (DSHS)
- Unemployment
- Disability
- Retirement
- Social Security Benefits
- Other Non-taxable Income
- Income Earned by You (including work study)
- Income Earned by Your Spouse/Live-In Partner
- Income or Gifts from Parents or Others
- Alimony
- Other

Do you expect next year's sources of income to be similar?

- Yes
- No

If NO, please note the changes:

Maximum of **50** words. *Currently Used: 0 words.*

What types of Financial Aid did you receive the past year? (January-December 2019)

- Grants/Scholarships
- Student Loans
- Work Study
- Other

Do you expect next year's sources of income to be similar?

- Yes
- No

If NO, please note the changes:

Maximum of **50** words. *Currently Used: 0 words.*

FINANCIAL NEED

Expected monthly childcare fees.

What is your portion of the monthly childcare fees?

Name of current/future child care provider?

Please explain what type of financial support you are receiving from your child(ren)'s other parent.

Maximum of **100** words. *Currently Used: 0 words.*

Do you receive any assistance with your monthly childcare from:

- STATE
 - ECEAP
 - ASEWU
 - OTHER
-

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Please answer the following.

1. Please provide one or two paragraphs about how this scholarship would impact you and your family. *

Maximum of **500** words. *Currently Used: 0 words.*

2. Why did you choose your academic major or area of interest? *

Maximum of **525** words. *Currently Used: 0 words.*

3. How will studies affect your future plans? *

Maximum of **525** words. *Currently Used: 0 words.*

4. What obstacles or hardships have you experienced or are you currently experiencing that have had an impact on your ability to attend college? Please include any special circumstances that may be pertinent to your application. *

Maximum of **525** words. *Currently Used: 0 words.*

5. How have you been able to overcome these obstacles? *

Maximum of **525** words. *Currently Used: 0 words.*

6. How did you learn about this scholarship? *

Maximum of **525** words. *Currently Used: 0 words.*

5. Please use this space to share any additional information you feel is important to your application.

Maximum of **525** words. *Currently Used: 0 words.*

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I certify that all information on this application is complete and accurate to the best of my knowledge. I certify that I have read the Eligibility and Application Checklist and I meet all requirements as specified for this application. Should I be awarded a scholarship, I understand that I may be asked to represent Women Helping Women Fund (WHWF) as a volunteer at fundraisers, as a speaker or as a subject in marketing campaigns. I hereby authorize WHWF to utilize information about and from my scholarship application and my photo for public relations purposes, publicity, or other scholarship opportunities.

By agreeing below, I certify that I understand and accept all conditions.

Check to acknowledge *

Agree

Name *

First

Last

Date *

MM

DD

YYYY

