

Scholarship Application

The Dallas Woman's Club/The Dallas Woman's Club Foundation
7000 Park Lane
Dallas, Texas 75225
(214) 363-7596

Must Be Postmarked by January 19, 2023

Application for scholarship funds available for use for 2023 - 2024 academic year.
Funds may be applied toward summer school 2023.

Date: _____

New Application Applied Last Year Renewal

Personal Data

Name:

Last *First* *Middle.* *Maiden*

Student ID #: _____

Male Female Date of Birth: _____ Age: _____ Place of Birth: _____

Permanent Home Address:

Street Address *Apt #* *City and County* *State* *ZIP Code*

Parents' Address:

Street Address *Apt #* *City and County* *State* *ZIP Code*

Current Address:

Street Address *Apt #* *City and County* *State* *ZIP Code*

Contact Information:

Cell: _____ Email: _____

Married Single Number in your immediate family that are living in household: _____

Texas resident? _____ How long? _____ United States Citizen? _____

Institution you are currently attending: _____

Current academic status: Undergraduate Graduate

Anticipated graduation date: Undergraduate: _____ Masters:: _____ Doctorate: _____

Institution you will be attending in the 2023-2024 school year _____

School Data

School Address:

_____ *Street Address* _____ *City* _____ *State* _____ *ZIP Code*

Financial Aid Telephone: _____

What term(s) are you attending this institution?

Are there any conditions to your acceptance? YES NO **If yes, please explain on a separate sheet.**

Undergraduate Data

Major(s): _____

In the school of (i.e., Liberal Arts, Business, Fine Arts, etc.): _____

List undergraduate institutions attended, years and number of hours completed:

_____ *Institution Name* _____ *# Years Completed* _____ *# Hours Completed* _____ *Graduation Date* _____ *Degree*

_____ *Institution Name* _____ *# Years Completed* _____ *# Hours Completed* _____ *Graduation Date* _____ *Degree*

Undergraduate Cumulative GPA as of December, 2022: _____

Graduate Data

Graduate Cumulative GPA as of December, 2022: _____

Graduate field of study: _____

In the school of (i.e., Liberal Arts, Business, Fine Arts, etc.): _____

University	Date Applied	Date Started	Hours Completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Data

Please list current activities/achievements including any offices, honors and/or awards:

Financial: List expenses by type for the semesters indicated.

	Summer 2023	Fall 2023	Spring 2024
Tuition	_____	_____	_____
Books	_____	_____	_____
Fees	_____	_____	_____
Total: (Tuition, Books & Fees)	\$ _____	\$ _____	\$ _____

A. Applicant's Employment Record: List current and previous employment.

Employment Dates	Employer	Duties	Hours per Week
_____	_____	_____	_____
_____	_____	_____	_____

Do you work or plan to work/intern during the academic year? YES NO

If yes, please provide: Hours _____ Salary \$ _____

If no, please explain: _____

B. Private Scholarships: List all current Scholarships, including any from The Dallas Woman's Club.

Scholarship	\$ Amount	Automatic (A) or Potential (P) Renewal
_____	_____	_____
_____	_____	_____

C. Government Grants: List all current and pending government grants.

Grant	\$ Amount	Automatic (A) or Potential (P) Renewal
_____	_____	_____
_____	_____	_____

D. Loans: List all current loans.

Loan	\$ Amount	Automatic (A) or Potential (P) Renewal
_____	_____	_____
_____	_____	_____

E. Total Outstanding Personal College Loans & Graduate (including tuition, books, and fees):

\$ _____

If you are granted a DWC scholarship, please be aware that it is only applicable for the school and course of study you have put on your application. Once awarded, the scholarship cannot be altered or transferred without the approval of The Dallas Woman's Club Scholarship Committee.

**Statement of Parent, Guardian, Spouse or Applicant
Concerning Financial Aid**

Applicant Name _____

The awards are made on the basis of high scholastic attainment, good character and the need for financial assistance. Since we will receive many applications, you will greatly help us and your applicant by giving explicit information. Your answers will be held in the strictest confidence and will be used only for the purpose of making the scholarship award.

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**TO BE COMPLETED BY PARENT, GUARDIAN, SPOUSE OR APPLICANT**  
*(Applicant, please complete only if sole supporter.)*

A brief statement explaining the financial need of applicant, including any extraordinary family expense(s).  
*(Attach sheet if necessary)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_

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PARENT OR GUARDIAN INFORMATION
(Please fill out ONLY if receiving help from parent or guardian)

Name of Father _____
Street Address/City/State/Zip _____ Phone _____
Employer/Occupation/Salary _____
How Long? _____ Other sources of income _____
Name of Mother _____
Street Address/City/State/Zip _____ Phone _____
Employer/Occupation/Salary _____
How Long? _____ Other sources of income _____

Other person financially dependent on parents/guardian (siblings, etc.):

Name	Age	Relationship to Applicant
_____	_____	_____
_____	_____	_____

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**SPOUSE INFORMATION**

Name of Spouse \_\_\_\_\_  
Street Address/City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Employer/Occupation/Salary \_\_\_\_\_  
How Long? \_\_\_\_\_ Other sources of income \_\_\_\_\_  
Combined Household Income \$ \_\_\_\_\_  
Number of Dependent Children \_\_\_\_\_ Ages \_\_\_\_\_

**The Dallas Woman's Club  
And  
The Dallas Woman's Club Foundation**

**Scholarship Application  
Check List**

Please be sure that you have followed all instructions per the instruction sheet, that you have completed the application in full and [email directly to renee@dallaswomansclub.com](mailto:renee@dallaswomansclub.com) or mail prior to January 19, 2023. Check each box beside the information you have enclosed. **ONE COMPLETE COPY** of the following **MUST** be submitted:

- 1. The application form completed in its entirety. Failure to do so may affect the committee's decision. **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**
- 2. Separate, one-page letter explaining your financial need, educational goals and your plans after graduation.
- 3. Current **OFFICIAL** transcript from the Registrar's office of the educational institution which you are currently attending can be [emailed directly to renee@dallaswomansclub.com](mailto:renee@dallaswomansclub.com) or mailed.
- 4. Current letter from the Student Aid Office of the educational institution you are attending stating your financial need can be [emailed directly to renee@dallaswomansclub.com](mailto:renee@dallaswomansclub.com) or mailed.
- 5. Current letter of recommendation on **OFFICIAL LETTERHEAD** from a Professor, Department Chairman or Advisor of the educational institution you are currently attending can be [emailed directly to renee@dallaswomansclub.com](mailto:renee@dallaswomansclub.com) or mailed.

**Note the Definition of Metropolitan Statistical Area for Dallas-Fort Worth-Arlington Residency: Counties are Collin, Dallas, Denton, Ellis, Hunt, Hood, Johnson, Kaufman, Parker, Rockwall, Somervell, Tarrant and Wise.**

**MUST BE POSTMARKED BY JANUARY 19, 2023**

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**Scholarship Application  
Criteria**

1. **Citizenship** Must be a United States citizen.
2. **Scholarship** Must have maintained a minimum of a 3.4 GPA. MUST include **official** transcript from school currently attending.
3. **Semester Hours** Must have completed a minimum of 30 undergraduate semester hours from accredited Texas college or university currently attending. Preference given to students in Junior/Senior year of undergraduate school or graduate students with a minimum of 15 hours.
4. **Good Character Letters** Reference letters must be on **official letterhead** from the Professor, Department Chair, or Advisor of the educational institution currently attending. Letter must indicate good character and the ability and determination to complete a college education.
5. **Need for Financial Assistance** Must include a current letter from the Financial Aid Office of the educational institution currently attending stating the financial need and listing all the current sources of aid.
6. **Dallas/Fort Worth Resident** **Must be a Dallas/Fort Worth Metropolitan Statistical area resident for home or parents (see Application Checklist for definition) and attend a Texas school.**
7. **Exclusion** Members of The Dallas Woman's Club and their immediate families may not be considered.
8. **Employees** Employees and special friends of The Dallas Woman's Club may be considered if they meet the same criteria as other candidates.
9. **Policy** Renewal of the prior year scholarships will be given preference if renewing students qualify.
10. **Scholarship Money** Range of funding per recipient: \$1,500 - \$4,000.