



## Non-Traditional Student 2019 Scholarship Application

The Women's Division is offering a \$1,000 scholarship for a *non-traditional student* for the 2019-20 school year. A non-traditional student includes someone who: has delayed entry to college, is returning to complete a previously unfinished undergraduate degree, is pursuing an additional undergraduate degree and/or pursuing a degree while working a full time job and/or taking care of a family. The scholarship can be used for any school related expense including tuition, books, room & board, fees or dues.

### Eligibility

In addition to the description above, applicants will be females seeking undergraduate professional or technical degrees and must be current Leavenworth County residents. The applicants must fill out the attached application, write a one page essay, attach one reference letter and submit official academic transcripts. Transcripts may be photo copies of the original, but transcripts, class schedules or grades printed from the Internet will not be accepted. Failure to correctly comply with application guidelines will result in disqualification of your application. Applicants may also be required to attend an interview with the Women's Division Scholarship Committee.

### Deadline

**Completed applications and accompanying materials must be received by Friday, March 29, 2019, at 5 p.m.** Applications received after this date will not be accepted. The scholarship will be awarded at the Women's Division luncheon on Tuesday, May 28, 2019.

### Instructions for completing application

1. **Please type or print clearly.**
2. Attach the following to completed and signed application:
  - a. **One character reference letter.** References can include academic, community and/or employers. Please do not include any references from family members.
  - b. The most recent academic transcripts from your high school, college/university, vocational or technical school, or documentation of GED completion.
  - c. One page, **typed**, single-spaced essay, **using correct grammar and spelling**, addressing the following question: *Why did you choose your course of study and what do you plan to do with this knowledge?*
3. Submit application and accompanying materials by mail or drop off to: Women's Division Scholarship Committee, Leavenworth-Lansing Area Chamber of Commerce, 518 Shawnee, Leavenworth, KS 66048. Chamber phone: 913-682-4112. Applications and materials may also be submitted electronically to: [wdscholarship@gmail.com](mailto:wdscholarship@gmail.com). You will receive an e-mail notification for documents submitted electronically. Signature is required on all applications no matter how submitted.

**Questions?** Please contact Debra Weaverling at the e-mail above or call her at 913-651-1040.

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

### Please check current academic classification

☐ High School-year of graduation \_\_\_\_\_ ☐ GED-year of completion \_\_\_\_\_

☐ College: \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior

Cumulative GPA: \_\_\_\_\_

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***Employment History (Please attach additional employers, if applicable.)***

1. Employer/Company name \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job title \_\_\_\_\_  
Employment dates \_\_\_\_\_ Hours per week \_\_\_\_\_

2. Employer/Company name \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job title \_\_\_\_\_  
Employment dates \_\_\_\_\_ Hours per week \_\_\_\_\_

3. Employer/Company name \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job title \_\_\_\_\_  
Employment dates \_\_\_\_\_ Hours per week \_\_\_\_\_

***Community Service/Extra Activities (Please attach additional list, if needed)***

Name of organization/description of activity	Participation dates	Hours per wk/mo
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

***Honors, Awards, Achievements (Please attach additional list, if needed.)***

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***Additional comments/Information (Please attach additional information, if needed.)***

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