



Soroptimist International of Woodland GAP Award Application

The **Soroptimist International of Woodland Award** of \$2,000 is for a **woman** at least 18 years old who:

- Is attending either a college or trade school
- Provides primary support for herself
- Is enrolled or has been accepted into a vocational or college institution
- Is not enrolled in a doctorate or post-doctorate educational program
- Has demonstrated financial need
- Is NOT a previous Soroptimist Live Your Dream (LYD) Award recipient
- Resides in Yolo County but not a city where there is another active Soroptimist club (currently Davis residents excluded)
- Has not received both this scholarship and the LYD Award in the same fiscal year
- Is not a Soroptimist member, an employee of Soroptimist International of the Americas, or immediate family of either

Deadline: September 30th of every year - Please type or print neatly in blue or black ink

First Name:		Last Name:	
Street Address:			
City:		State:	
		Zip:	
Email Address:		Phone Number:	
Date of Birth:		Marital Status:	
Occupation:		Employer:	
Do you financially support any children? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how many?	
Highest level of education achieved:			Date completed:
Name of the School or Training Program you are attending or have been accepted to:			
What are you studying?			
When will you complete your studies (month/year):			
Are you working while getting your education? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, how many hours per week?	

Please provide ANNUAL household income. This would include the following: employment income, government assistance, Social Security income, child support, alimony, and other scholarship/awards.

Annual Household Income per Year:

Please list the amount of any additional income:

Income	Amount per Year

Please provide ANNUAL household expenses. This would include the following: housing, utilities, food, medical, childcare, transportation, tuition, and books for school.

Annual Household Expenses per Year:

Please list the amount of any additional expenses:

Expense	Amount per Year

In addition, include the following with your application:

1. Letter of reference from two community members who are not relatives (may include instructors/professors)
2. Attach or input an essay of 750 words or less. Tell us about challenges you've faced, including how you've addressed those challenges, and how this award could help you, describing how you would use this award.

Please type or print neatly in blue or black ink

Completed applications and all supporting materials are due by **September 30 of every year**. Mail completed applications to: Soroptimist International of Woodland, P.O. Box 1231, Woodland, CA 95776, or email them to siwoodland@soroptimist.net.

Agreement

- I certify that all information provided in this application is complete and accurate to the best of my knowledge. I will notify Soroptimist International of Woodland if there are any changes.
- I understand that this scholarship may be taxable.
- I understand that my application and supporting materials become the property of Soroptimist International of Woodland.
- I hereby grant permission to Soroptimist International of Woodland (SIW) to use my name, likeness and/or voice for all publicity purposes and in any media format. Media formats include but are not limited to: newspapers, magazines, television, radio, film, photographs, video, digital, social media, and the internet. SIW shall retain all right to said materials.

Please sign electronically or in blue or black ink.

If signing electronically, click in the signature field and a box will pop up. Input a password and signing location, then click sign. You will then be promoted to save the document to affix the signature.

Date

Signature of Applicant

If you have any questions, please contact us via email at siwoodland@soroptimist.net.

Please enter your essay (750 words or less) in the space provided below: