

MARCO ISLAND WOMAN'S CLUB FOUNDATION

1860 Watson Road, Marco Island, Florida 34145

October 15, 2018

Dear High School Senior,

Thank you for considering a scholarship from the Marco Island Woman's Club Foundation! We award scholarships from \$1,000 to \$12,000 to both young men and women.

To be considered for a Marco Island Woman's Club Foundation Scholarship, you must: 1-be a legal resident living on Marco Island; 2-maintain at least a 2.5 GPA per semester in college; and 3-successfully complete a minimum of twelve (12) credit hours each semester.

To apply for a scholarship, you need to provide:

- A completed application
- Copy of family's 2017 Form 1040 U.S. Individual Income Tax Return (that will be held in strictest confidence)
- A personal statement (see application for instructions)
- Complete high school transcripts
- At least three letters of recommendation


Return all of the above (completed application, copy of family's 2017 Form 1040 U.S. Individual Income Tax Return, personal statement, complete high school transcripts, and at least three letters of recommendation) to your guidance counselor no later than March 19, 2019.

If you are awarded one of our scholarships, you will be notified by the Marco Island Woman's Club Education Committee. Scholarship awards will be paid directly to the college or university in yearly installments, not to parents, guardians, and students.

If you have any questions or concerns, please feel free to contact Debbie Roddy at 239-394-4832 or droddy46@gmail.com.

Best wishes for success in your future endeavors.

Sincerely,



Debbie Roddy
Chair, Marco Island Woman's Club Education Committee

**MARCO ISLAND WOMAN'S CLUB
FOUNDATION APPLICATION - 2019**

PERSONAL INFORMATION

Name: _____ Social Security #: _____

Parent/Guardian's Name: _____ Occupation: _____

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Marital Status (Please check one): Married ___ Separated ___ Divorced ___ Single ___

Number of Applicant's Siblings: _____ Ages of Siblings: _____

Number of children currently in college supported by parents(s)/guardians(s): _____

Home Address: _____ City: _____ Zip: _____

Phone Home: _____ Mobile: _____

E-Mail: _____

Is applicant related to a member of the Marco Island Woman's Club?

Yes _____ No _____ If "Yes," the member's name is: _____

COLLEGE/POST - SECONDARY INFORMATION

Applied to: 1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Accepted to: _____

Plan to attend: _____ Major/Program of Study: _____

Career Plans: _____

EXTRA CURRICULA ACTIVITIES

List activities, awards, organization memberships/offices held, etc. with dates. (You may attach a separate sheet of paper if needed):

(Turn over to complete Page 2)

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WORK EXPERIENCE

List work experience with dates:

_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____

COMMUNITY SERVICE/VOLUNTEER ACTIVITIES

List community service/volunteer activities with dates:

_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____
_____	From: _____	To: _____

FINANCIAL INFORMATION

Enclose a copy of family's 2017 IRS Form 1040 U.S. Individual Income Tax Return (that will be held in strictest confidence). This information will assist in evaluation of your application.

Does student have a car? Yes _____ No _____
If "Yes," make of car: _____ Model year: _____

PERSONAL STATEMENT

Enclose a separate sheet of paper, typed, double-spaced and in at least 100 words, explain why consideration should be given to your application. You may wish to include educational goals, unusual circumstances (financial, personal, etc.). Please also provide information which may be of assistance in considering your application.

ACADEMIC SUMMARY

Please enclose complete high school transcripts and at least three (3) letters of recommendation.

Cumulative Grade Point Average: ACTUAL (4.0): _____ WEIGHTED: _____

SAT: Total _____ SAT: Verbal _____ SAT: Math _____

ACT COMP: _____

We authorize use of this information only for determining scholarship eligibility.

_____	_____	_____	_____
(Parent/Guardian Signature)	(Date)	(Student's Signature)	(Date)