

**GFWC WOMAN'S CLUB OF ZEPHYRHILLS**  
**P.O. Box 735**  
**Zephyrhills, FL 33539**

Each year the Woman's Club of Zephyrhills offers scholarships to individuals pursuing continuing education in all fields at either community colleges, universities, trade schools or those interested in obtaining their GED.

Scholarships are given out in May and recipients are invited to our monthly meeting and luncheon on the first Friday of May to be introduced to our members. Scholarship monies are paid directly to the educational entity you will be attending. Please read the application carefully as all requirements must be completed for consideration of a scholarship. If you are not receiving funds from other sources, please note that in the proper area of the application.

Reference letters must be signed by the person writing the recommendation and include a telephone number for that person.

Please include your telephone number – cell and/or home – where you can be reached with the results of your application.

Any questions regarding this application may be directed to Linda Weyer at (813) 479-5109. Applications are also available on our website at [www.gfwczephyrhills.org](http://www.gfwczephyrhills.org).

Thank you,

Scholarship Committee  
GFWC Woman's Club of Zephyrhills

# **GFWC Woman's Club of Zephyrhills Scholarship Application**

Application must be received by April 15, 2017.  
Regardless of age, applicants must at least be a high school senior or high school equivalent (for GED candidates).

Instructions for completing this scholarship application:

1. Application is to be completed by the applicant.
2. Please type or print clearly.
3. Attach the following to the completed application:
  - a. 2 character reference letters
  - b. A biographical statement of 250 words or less to include educational background, financial need, activities you have taken part in for home, school, community or church, and how the scholarship will help you achieve your goal.
4. Send completed application with attachments to:  
GFWC Woman's Club of Zephyrhills  
Attn: Scholarship Committee  
Post Office Box 735  
Zephyrhills, FL 33539

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

Address \_\_\_\_\_ Phone \_\_\_\_\_

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

Age \_\_\_\_ Marital Status \_\_\_\_\_ # of Dependents \_\_\_\_ Currently employed (Y/N)? \_\_\_\_

Name of current or last employer (if any) \_\_\_\_\_

Position \_\_\_\_\_

Course of study and expected date of completion for which the scholarship will be used: \_\_\_\_\_

List the source and amount of funds available, in addition to this scholarship: \_\_\_\_\_

Please feel free to add any other information which you feel is important: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_