



SOROPTIMIST INTERNATIONAL OF THE MARIANAS SCHOLARSHIP APPLICATION FORM

Deadline: November 15, 2020

Complete all sections of this form legibly (type or print if necessary) and attach all required information.

NAME: _____
 First **Middle** **Last**

How long have you been a resident of Guam? _____

Home Address	Mailing Address
_____	_____
_____	_____
_____	_____

Telephone: _____ **Fax:** _____

Email Address: _____ **Social Security Number:** _____

Date of Birth: _____ **Place of Birth:** _____

High School Attended: _____

Colleges / Universities Attended:

_____	_____
_____	_____

Major: _____ **Minor:** _____

Class Level: _____ **GPA:** _____

Are you: [] U.S. Citizen [] U.S. Permanent Resident

SIM Scholarship Application Form

EXTRACURRICULAR ACTIVITIES:

Describe any activity in which you have participated. Be sure to include all activities that show evidence of your interest in your major. Include any awards that you have received. If additional space is needed for any questions, type on a separate sheet of paper and attach to this application.

WORK EXPERIENCE:

Place of Employment	Dates	Work Performed	Supervisor

VOLUNTEER SERVICE:

Place of Service	Dates	Service Performed	Supervisor

OTHER SCHOLARSHIPS:

List all other scholarships or forms of financial assistance that you are now receiving or will be receiving:

Name of Scholarship	Period Covered

SIM Scholarship Application Form

Describe your academic and career goals: (attach additional sheet if necessary):

Explain why you should be awarded this scholarship: (attach additional sheet if necessary):

I certify that all the answers I have given in the application are accurate to the best of my knowledge. I grant permission to Soroptimist International of the Marianas to obtain information regarding my academic standing, enrollment status, and financial status in order to evaluate my candidacy for scholarship awards. I understand that this information will be kept strictly confidential and will be available only to the scholarship committee members having a need to know for the purpose of scholarship determination.

If I am awarded a scholarship from Soroptimist International of the Marianas, I authorize said organization to publish my name as scholarship recipient and understand that I may be asked to attend a Soroptimist function.

Signature of Applicant: _____ Date: _____