



Women Helping Women Scholarship Committee
Kerr County Women's Chamber, Inc.
P. O. Box 290621
Kerrville, Tx. 78029-0621
www.kerrcountywomenschamber.org

Women Helping Women

Kerr County Women's Chamber Scholarship Opportunity

The Hill Country has traditionally been known as a supportive and caring community. The Kerr County Women's Chamber is no exception and takes its scholarship role in the community seriously. The mission of KCWC is to work for the betterment of the Kerrville Area community through charitable, civic and environmental projects and programs. Scholarships are awarded to women trying to help themselves grow in economic independence giving them a second chance and encouraging them to reach out, embracing their dream. This funding opportunity is for women in transition seeking a college degree in higher education.

Dear Applicant,

We are pleased you are applying for our scholarship funding opportunity. We invite all Kerr County adult women to apply. The selection committee is seeking women with a sincere need for financial assistance and for whom the opportunity for higher level education classes will lead toward economic independence.

We look forward to receiving your application,
The Selection Committee

DEADLINE:

Applications must be postmarked no later than **April 30**. Please **DO NOT** e-mail your application. All Applications should be mailed to: Women Helping Women Scholarship Committee, Kerr County Women's Chamber, Inc., P. O. Box 290621, Kerrville, Tx. 78029. Recipients will be notified in May, and funds will be made available shortly thereafter to the college of recipient's choice.

ELIGIBILITY REQUIREMENTS:

1. To qualify, the applicant must be a woman 21 years of age or older.
2. Applicant must be a resident of Kerr County.
3. The applicant **MUST** provide proof of enrollment or a letter of acceptance from an accredited College, University or Technical/Trade School for the next enrollment period.
4. Financial Assistance will be for tuition, fees and/or books **ONLY**; any funds not used for tuition, fees and books **MUST** be returned to the Kerr County Women's Chamber.
5. Past recipients are eligible to reapply annually.
6. The applicant must be available for an interview with the selection committee.

SUBMISSION REQUIREMENTS:

1. The application must be legible or typed.
2. Complete **ALL** sections of the application.
3. Include up to 4 letters of reference-not family members.
4. Include a transcript from your current/last school.
5. Mail the completed attached application to the above address on this letterhead.



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SCHOLARSHIP APPLICATION

Applications received after April 30 and/or incomplete will not be considered.

Women Helping Women

GENERAL INFORMATION:

Name: _____
Last Name (Legal) First Name Middle Initial

Physical Address: _____

City: _____, Texas Zip Code: _____

Mailing Address: _____

City: _____

Phone: (Home): _____ Phone (Cell): _____

E-Mail: _____ Date of Birth: _____

Are you currently employed? Yes ___ No ___ If yes, Where: _____

Who is your Supervisor: _____ May we contact him/her: Yes ___ No ___

Marital Status: Single ___ Married ___ Number of Adults in the Home: _____

Spouse's/Significant Other's Employer: _____

Number of Children in the Home: _____ Ages of Children in the Home: _____

ACADEMIC INFORMATION:

In the Fall, I will be attending _____ as a:
(College/Technical School)

Freshman Sophomore Junior Senior Master's Level Technical School Student

Medical School Student Nursing School Student Other: _____

My Current GPA Score: _____

Proof of acceptance or current student enrollment from the above school is REQUIRED



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FINANCIAL INFORMATION:

(Circle One): Own/Rent Monthly : _____

If renting, name and phone number of landlord: _____

CURRENT MONTHLY INCOME:

Total Wages per Household (include spouse/significant other) \$ _____

Food Stamps \$ _____

Day Care Assistance \$ _____

Social Security and/or SSI \$ _____

AFDC \$ _____

Child Support \$ _____

Other \$ _____

TOTAL MONTHLY INCOME: \$ _____

CURRENT MONTHLY EXPENSES:

House or Rent Payment \$ _____

Car Payment(s) Paid to: _____ \$ _____

Day Care paid to: _____ \$ _____

Electricity- Gas- Propane: \$ _____

Water \$ _____

Telephone \$ _____

Cable \$ _____

Groceries (Monthly Average) \$ _____

Auto Repairs and/or Gasoline (Monthly) \$ _____



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Clothing and/or Uniform Allowance (Monthly) \$ _____

Other Household Expenses (explain)

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL MONTHLY EXPENSES: \$ _____

Please list your approximate anticipated educational expenses for a year:

Tuition \$ _____ Books \$ _____ Fees \$ _____

List Other Financial Aid you anticipate receiving for the Fall Semester:

Example: Pell Grant, Other Scholarships, Texas Workforce Commission Grant

Complete:

Grant	Scholarship	Loans	

Write a paragraph on your goals and how you plan to achieve them:

I do hereby affirm that all the application information provided by me is true and correct to the best of my knowledge and that providing false information could disqualify me from consideration.

Signature of Scholarship Applicant: _____ Dated: _____