

 **AAUW Atlanta Branch Scholarship Award**

AAUW (American Association of University Women) advances equity for women and girls through advocacy, education, philanthropy and research. Founded in 1881, AAUW is the oldest and largest national organization working for the advancement of women. The Atlanta Branch of AAUW was founded in 1905. AAUW values and seeks a diverse membership. Membership is open to graduates holding an associate or equivalent, baccalaureate, or higher degree.

The AAUW scholarship award is intended to be used for supplemental expenses such as books, fees, child care, or transportation. Funds for the local Atlanta area AAUW awards have been raised for more than 50 years through our annual AAUW Bookfair held every fall. More information is available at our websites **[www.aauwatlanta.org](http://www.aauwatlanta.org/)** and [**www.bookfairaauw.org**](http://bookfairaauw.org/).

**Guidelines for the Atlanta Branch AAUW 2020/21 Scholarship Applicant**

1.   Apply for financial aid at your college or university for Fall 2020.

2.   Review these criteria for the AAUW award. All applications will be considered but **preference** is given to women who are:

a.   At least 30 years of age.

b.   Residents of Georgia enrolled in one of the following Metro Atlanta institutions that are National Partners of AAUW:

1) Agnes Scott College
2) Atlanta Technical College
3) Emory University
4) Georgia Gwinnett College
5) Georgia Institute of Technology
6) Georgia State University
7) Kennesaw State University
8) Oglethorpe University
9) Savannah College of Art and Design

c.   Returning to school to complete a degree.

d.   Years of study before graduation (full or part time).

e.   Seeking funds for supplemental expenses (e.g., books, fees, childcare, transportation). Tuition funds may be covered from other sources.

f.   In good academic standing.

g. Applicants majoring in all academic fields are encouraged to apply.

h. Scholarships will be awarded based on academic merit, financial need and community involvement.

i. Atlanta Branch would like awardees to help with the annual book fair at Perimeter Mall on at least one day (September 2020), if their schedules allow.

3.   Scholarship Application Directions.

a. Complete or print the application form found on page 3 – 4. Microsoft Word versions 2010 and later complete directly and print for submission. All other versions print application and **type or print legibly**.

b. Have your institution submit an official academic transcript.

c. Arrange a letter of reference from someone who knows you well (not a family member).

4.   Send the three items by mail to:

**AAUW Scholarship Committee**750 Park avenue NE, Unit 29S
Atlanta, GA 30326

5.   Application materials must be received before **May 8, 2020.**

6.   Please note, no application will be accepted by e-mail**.**

Be sure that all forms are completed accurately. If you have questions, contact **scholarship@aauwatlanta.org**

Those awarded scholarships will be invited to attend the September 2020 Atlanta Branch AAUW new member meeting.

We look forward to reviewing your application.



**AAUW Atlanta Branch**

**2020/21 Scholarship Application**

Complete form using Microsoft Word 2010. TAB to navigate.

1. Name:
2.

First MI Last

1. Address:

Number and Street unit number

City State Zip

1. Telephone numbers (day) (     )       (evening) (     )

 4.    E-mail address

 5.    State in which you reside

6.     Education Information.

School you attend or plan to attend in Fall 2020

Academic status (Fall 2020) [ ]  Junior [ ]  Senior

Program/Major       Grade point average

Do you anticipate having full tuition funds for Fall 2020? [ ]  Yes [ ]  No

Are you a [ ]  full or [ ]  part-time student?
Do you attend any of your classes online? [ ]  Yes [ ]  No If yes, what percentage do you attend online?

How do you plan to use AAUW funds if awarded (e.g., books, child care, transportation)?

Student ID number or Social Security number (required by financial aid officer for recipient identification)

7. Personal information

Birth Date

Number and ages of dependent children living with you

Are you the only adult living in your home responsible for the care and wellbeing of these dependent children? [ ]  Yes [ ]  No

Other dependents for whom you are legally responsible (indicate relationship to you)

8. Employment

Are you currently working? [ ]  Yes [ ]  No If yes, number of hours/week

Name and telephone number of your place of employment and supervisor:
Employer:       Supervisor
Telephone number (       )

9. Please write a short explanation of your **background, goals, and academic interests including any community or volunteer activities:**