

Soroptimist International of Helena New Adventures Educational Scholarship Instructions and Application

Soroptimist International of the Americas was founded October 3, 1921, in Oakland, CA. From the beginning, it has grown to the world's largest classified service organization consisting of professional and businesswomen with members in 120 countries around the world. SI of Helena intends to award up to two \$1,000 New Adventures Educational Scholarships.

Payment of Scholarship:

The scholarship will be disbursed directly to the institution in one lump sum. Winners will need to provide Soroptimist International of Helena the name of the school you will be attending and your student ID or other documentation to substantiate your enrollment, within 30 days of receiving notification of scholarship.

Step 1: Determine if you are eligible

This award is open to a senior high school woman who:

- 1. Resides in the tri-county area of Lewis & Clark, Broadwater, and Jefferson counties
- 2. Is enrolled or has been accepted to a vocational/skills training program or similar non-traditional career program, or 2-year degree program
- 3. Is motivated to achieve your education and career goals
- 4. Has NOT previously been the recipient of a Soroptimist International of Helena award
- 5. Is not a Soroptimist member or immediate family member

Step 2: Tell us about yourself

Fill out the scholarship application telling us about yourself. Your information will be kept confidential and shared only with the evaluators.

Step 3: Ask people to tell us about you

You will need two different people – who are not related to you – to provide references. The references are to be returned with your application.

Step 4: Submit your application

Mail your application and two references to the address listed below postmarked by January 31st. Incomplete applications, applications received without references, and applications received after the deadline will not be considered.

SI of Helena Attn: New Adventures Educational Scholarship PO Box 1216 Helena, MT 59624

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PART 1: Basic Information

Name:			
Ad	dress:		
Pho	Phone:		
Em	ail Address:		
PA	RT 2: What Are Your Education and Career Goals?		
	No. 10 Calculate Control of the Cont		
A.	Name of School or training program you are attending or have been accepted to.		
В.	What are you studying? (Ex: Auto Mechanics, Carpentry, Massage Therapy or another non-		
	four-year career.)		
C	When will you complete your studies (month and year)?		
٥.	Then him you complete your studies (month and year).		
	Briefly please tell us about your career goals. Give specifics about how your education and		
	training supports these goals and how this scholarship will help you achieve your educational		
	goals.		
Ε.	Tell us about your financial situation. This scholarship recipients are chosen in part based on		
-	financial need. Please share basic information about your monthly income and expenses. What		

scholarships or financial aid have you applied for or received. Please be as exact as you can.

PART 3: Agreement

Please read the following information carefully. When you type your name below, you are agreeing to what you have read.

- I certify that all the information provided in this application is complete and accurate to the best of my knowledge. I will notify Soroptimist International of Helena (SI) if there are any changes.
- I certify that this is the only application I have made in any format or to any address this year for a New Adventures Educational Scholarship.
- I understand that my application may be submitted electronically for evaluation.
- I understand that my application becomes the property of SI of Helena. The application will be considered confidential unless the applicant grants SI Helena written permission to release personal information for the purpose of publicizing the award.

By typing or signing your name below, you adhere to the above requirements.

nature of applicant	Date	
How did you hear about the New A	dventures Educational Scholarship?	
Check all that apply:		
A local Soroptimist club		
A friend, relative, or co-worker		
A career counselor or advisor at my school		
Social media		
A flyer posted in my community		
Internet search		
Searchable database of scholarships:		



Other:





Soroptimist Media Consent Form

I hereby grant permission to Soroptimist International of Helena to use my name, likeness and or

voice for all publicity purposes and in any media format. Media formats include but are

limited to various print, digital, video & social media outlets.
Name (print)
If above person is under 18 years of age:
Parent/Guardian Name (print)
Signature
Address
Phone
Email
Date