

Garnett Business and Professional Women & Anderson County Farm Bureau

Non-Traditional or GED Applicant

Application for Scholarship

Purpose: This scholarship is available to a non-traditional or GED applicant wanting to broaden their education or training to increase their abilities.

General Requirements: The scholarship is available to those meeting the following requirements:

1. The applicant must be at least thirty (30) years of age for non-traditional applicant OR seventeen (17) for a GED applicant.
2. The applicant must be a high school graduate or GED recipient.
3. The applicant must be recommended by a community member in good standing who knows of the applicant's needs, standing in the community, and ability to pursue courses outlined in the proposed course of study.
4. The applicant must attend a school in Kansas. At the discretion of the committee, a scholarship may be approved for a highly specialized training which cannot be secured in Kansas.
5. The applicant must be a resident of Anderson County, Kansas.
6. The applicant must submit official transcripts of previous studies (high school or GED).
7. The applicant must submit three (3) letters of reference.
8. The applicant must submit a 250 word essay on the following prompt:
 - a. Describe your program within your proposed field of study, the institution you wish to attend, the reasons for its selection, future plans and aims for your career and any other information that may be helpful to the awarding committee.
9. The applicant must be enrolled in a minimum of 12 credit hours of which 6 credit hours must be taken on campus.

Procedure for Selection:

1. An application, 3 reference letters, and essay are sent to:
Garnett BPW
P.O. Box 97
Garnett, Ks. 66032
2. The BPW-Farm Bureau Scholarship Committee will select the recipient.
3. The BPW-Farm Bureau Scholarship Committee Chair will immediately notify the winning applicant. All other applicants will be notified of the decision by letter.

Procedure for Payment of Scholarship:

Payment will be made directly to the recipient's institution of higher education after the applicant is enrolled. No scholarship award will be paid to a recipient.

Follow-Up Procedure:

1. If for any reason, the applicant fails to complete satisfactory performance or withdraws, the applicant must repay the scholarship award within one (1) year.
2. This scholarship is for a one-year term only. Any applicant, including the winning applicant, may reapply for this scholarship the following year.

All applications are available and reviewed without discrimination on the basis of race, color, national origin, sex, age, or handicap.

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All requirements (e.g. application, references, transcript(s), and essay) as stated in the scholarship description must be met and/or submitted in order to be considered.

Please email any questions to garnettbpw@yahoo.com

Name of Applicant: _____ Birth Date: _____

Address: _____

Phone Number: _____

Email Address: _____

Name, Occupation, Address, and Phone # of Closest Relative:

How many Dependents do you have? _____

Names & ages: _____

Have you applied for other Financial Aid (e.g. Grants, Loans, Work-Study, and Scholarships)?

If so, please list: _____

Are you eligible for Benefits (e.g. Social Security, GI Bill War Orphans, etc.)?

If so, in what amounts: _____

Schools attended and dates attended:

Employment experience, type of work, dates of employment:

Describe your Community Involvement:

Attach additional sheet if necessary.

List any Offices Held and/or Honors & Awards Received:

Attach additional sheet if necessary.

This award is to be made in payment of \$250.00 per year, for the academic school year applied for. Payment will be made directly to the institution upon proof of registration. If a recipient withdraws after enrollment and award receipt, the money granted must be refunded within one (1) year.

By signing below the applicant agrees to the conditions as stated above and confirms information contained within this application is truthful and prepared solely by the applicant.

Signature: _____

Date: _____