



Women's Council of Dallas Association of Real Estate Brokers Scholarship Program

Scholarship Mailing Address
P.O. Box 796
Haslet, TX 76052
214-869-2757
Email: madgeday@gmail.com

Greetings,

Enclosed, please find the 2019 scholarship application from the ***Women's Council of Dallas Association of Real Estate Brokers, Inc.*** We are pleased to assist you in the completion of your education and encourage you to remain focused and steadfast in accomplishing your goals. Your dreams can come true with hard work, tenacity, and uncompromising work ethics.

You have what it takes to succeed in every aspect of life and the Women's Council is proud to assist in this outstanding cause. Once we have received your COMPLETED application, we will send you notice with instructions on the next steps.

Thank you for your application and congratulations on graduating in the class of 2019! If you have any questions, please contact me directly at (214) 869-2757.

Sincerely,

Madge Day
WCDAREB, President



CRITERIA FOR SCHOLARSHIP APPLICATION. DEADLINE FOR APPLICATION IS August 1, 2019 @ 5:00 PM CT

Application and supporting documentations should be emailed as ONE PDF to:
mageday@gmail.com

Contact Madge Day at (214) 869-2757 for any questions

ALL SCHOLARSHIPS ARE BASED ON THE FOLLOWING GENERAL CRITERIA:

1. Must be Referred by a Women's Council of DAREB Paid Member.
2. Must be at least 18 years of age.
3. Proof of Citizenship-Driver License, State Identification.
4. Proof of Overall Grade Point Average (GPA) rating. (Copy of final Report Card).
5. Proof of College Entry/Acceptance (Schedule, Letter of Enrollment).
6. Letter of Recommendations: Choose Any Two (2)
 - a. Teacher, School Counselor
 - b. Pastor, Church, Business/Organization
 - c. Summer Activity
7. Community Service (1) - The type of volunteer service performed during your high school and time frame involvement. MUST BE TYPED.
8. Achievements and Awards
 - a. List awards
 - b. Organizations
 - c. Dates
 - d. Services provided
 - e. List activities during high school
9. Short paragraph of goals and objectives during college and after college (300 words or less). MUST BE TYPED.
10. A small photograph is required.



APPLICATION INFORMATION

Name of Women's Council Referral:	
Student Name:	
Student's Address:	
Cell Number:	
Email Address:	
Date of Birth:	
Citizen of US: YES [] NO []	
Last 4-digits of Social Security Number:	
High School Graduation Date:	
High School:	
College Attending or Planning to Attend:	
Address:	
MAJOR:	
MINOR:	
EMERGENCY CONTACT PERSON INFORMATION:	NAME:
	ADDRESS:
	PHONE NUMBER:
Student's Signature:	



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REFERENCES: (3) Please Complete Below:

NAME	ADDRESS	City/State/Zip
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EMAIL ADDRESS	PHONE NUMBER
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