

Business & Professional Women of Nevada County

DOLORES “DEE” ELDRIDGE SCHOLARSHIP GENERAL INFORMATION & ELIGIBILITY

Members of Business & Professional Women of Nevada County want to make a difference in the lives of local women re-entering college or vocational school and the workplace. In November 1997, we established the Dolores “Dee” Eldridge Scholarship Fund to achieve this goal. We know that getting help with tuition, books, daycare or other needed services or supplies, in the form of a small education grant, can make a difference to women seeking to improve their marketability in the workplace. Scholarships ranging from \$750 to \$1500+ are awarded in August of each year.

DEADLINE FOR SUBMISSION: June 30th

ELIGIBILITY REQUIREMENTS: You must...

- Be a woman 25 years or older and reside in Nevada County
- Have successfully completed at least one semester’s work at an accredited school OR have completed one half of an accredited vocational training school program
- Currently attend the above-cited school or training program at least half time (i.e., carrying at least six units)
- Have a GPA of 2.5 or higher
- Demonstrate financial need
- Support BPW’s mission statement and legislative platform (see page 8)
- Be available for a personal interview, if contacted
- Provide the following documentation as part of the application packet:
 1. Candidate application form (pages 2-5)
 2. Transcript or proof of enrollment
 3. Three current (within the last year) letters of reference
 4. A brief essay (a 12-to-15 sentence personal statement, minimum 200 words) on the topic: A WOMAN’S ISSUE THAT CONCERNS ME MOST.

SELECTION PROCESS

Candidate applications are evaluated by the BPWNC Scholarship Committee. A total of 100 points is possible. The Committee reserves the right to make all decisions regarding awards and all decisions are final. You will be evaluated on the following:

FINANCIAL NEED - 30 points

GOALS - 20 points

ESSAY - 20 points

LETTERS OF REFERENCE: one from an employer or volunteer manager, one from

an instructor or professor, and the third a character reference - 20 points

FORMS & PAPERWORK (accuracy and completeness) – 10 points

Finalists will be called for a personal interview. The winning candidate will have realistic goals and display potential ability and aptitude for her chosen field, ambition, motivation and financial need. Awareness of the greater community is desirable. In the personal interview, each candidate will be asked the same questions; and depending on responses, any follow-up questions will vary. Previous winners are welcome to apply for a repeat award.

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**DOLORES “DEE” ELDRIDGE SCHOLARSHIP
APPLICATION FORM**

Please make sure you meet all requirements outlined on the first page of this document.

Applications must include all supporting documents at time of submission: transcript or proof of enrollment, letters of reference, essay, and any attachments to your application. No documents may be submitted separately or after the deadline. Please type or print information. Incomplete applications will not be considered or returned. **Use the attached worksheet to help ensure you have included all required elements.**

Deadline for submission: June 30. A postmark of June 30 is acceptable.

Applicant Name _____

Mailing Address _____

Home landline (____) _____ Cellphone (____) _____

Email _____

Date of Birth _____

Name of Program Attending _____

School/Address _____

Dates of Attendance _____

Current Classes/Units and GPA (Attach Proof of Enrollment/Transcripts)

Awards, Honors or Scholarships Received

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Educational Goal and Reason For Choosing This Goal

Plans After Receiving Your Certificate or Degree

Employment & Volunteer Activities

Outside Interests

See the Worksheet on page 6 for details on the essay, transcripts, and letters of reference, all of which should be provided as additional enclosures.

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FINANCIAL STATEMENT

Please provide your best estimates of **MONTHLY** income and expenses. Use "NA" for any section not applicable. For non-monthly expenses (e.g., car repair & insurance), estimate your annual expense and divide by 12.

INCOME each month	\$
Wages/Salary	
Public Assistance (incl. SNAP/TANF, housing assistance, Social Security/ Disability, WIC, food stamps, etc.)	
Child Support/Spousal Support	
Other Income source	
Scholarships, Grants, Financial aid	
*Other income non-monthly (including from family, friends, spouse, roommate, etc.)	
TOTAL INCOME	
EXPENSES each month	
Rent/Mortgage/Property Taxes	
Home/Renters Insurance	
Car Payments	
Car Insurance, Car Repairs/Maintenance	
Other Loan Payments	
Health Insurance	
Food: Groceries, fast food, dining out	
Utilities: Gas/Propane, Electricity, Trash, Water, Sewer	
Child Care/Elder Care	
Cable/Television/Internet	
Telephone/Cell Phone	
Gas/Parking	
Education/Tuition/Fees	
Credit Card(s) payments	
Other Personal Expense	
*Other	
TOTAL EXPENSES	

*Remember to include income and expenses that do not occur on a monthly basis.

I certify that the above information is true and correct to the best of my knowledge.

 Date

 Signature

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NAMES AND AGES OF DEPENDENTS FOR WHOM YOU ARE RESPONSIBLE

_____	_____
_____	_____
_____	_____
_____	_____

LETTERS OF REFERENCE

Please enclose three current letters (written within the last year): one from an employer or volunteer manager, one from an instructor or professor, and the third a character reference (from a friend, co-worker, etc. who is not a relative). **Letters must be dated and signed, and include the names, addresses & phone numbers of the signers.**

See the Worksheet (page 6) for a grid that will help you track your progress in obtaining your letters. A copy of the completed Worksheet must be included with your application – you can make a photocopy or use the Worksheet Copy 2 on page 7 to make an additional copy.

ESSAY: PLEASE WRITE AND INCLUDE YOUR PERSONAL STATEMENT ON SEPARATE SHEET(S), 200 WORDS (minimum, about 12-15 sentences), ON “A WOMAN’S ISSUE THAT CONCERNS ME MOST.”

See page 8 for who to call if you have any questions or need help completing this application.

I hereby certify that I am 25 years of age or older, a resident of Nevada County, I have successfully completed at least one semester’s work at an accredited school or have completed one half of an accredited vocational training program, and further, I am currently attending the above-cited school or training program at least half time (carrying at least 6 units), and further, I have a GPA of 2.5 or higher. I have read (on page 8), understand and agree with BPW’s mission statement and legislative platform.

Signed: _____ Date: _____

Mail pages 2-5 of this completed Application, a completed Worksheet (page 6), and all additional required elements, postmarked before or on June 30, to:

**BPW of Nevada County – DDE Scholarships
P.O. Box 291
Grass Valley, CA 95945**

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**WORKSHEET (COPY 1)
FOR THE DOLORES “DEE” ELDRIDGE SCHOLARSHIP AWARD**

Use this worksheet/checklist to collect and organize your required documents

**A GOOD WAY TO STAY ORGANIZED IS TO PLACE EVERYTHING INTO A
LARGE FOLDER OR MANILA ENVELOPE AS YOU COMPLETE IT.**

Please double-check the applicant rules to make sure you meet the eligibility requirements.

1. I’ve answered all questions as best I can, and double-checked all dates and figures.
Date completed _____
2. I’ve filled out the Financial Statement based on my records of income and expenses.
Date completed _____
3. I’ve requested at least three **current** (within the last year) **signed and dated** letters of recommendation. Each has the name, address and phone number of the person giving the reference.

	Reference’s name, phone & email	Date I requested the letter	Date I received the letter
One letter from employer or volunteer manager.			
One letter from instructor or professor.			
One character reference (from a friend, co-worker, etc.) who is not a relative			
Optional additional letter			

4. I sent for (or ordered) transcripts on this date _____

Transcripts received by me on _____

5. I have written a (minimum) 200-word essay/personal statement on “A Woman’s Issue That Concerns Me Most.”

Edited, fact-checked and spelling/grammar checked _____

5. I HAVE GONE OVER REQUIREMENTS ONE LAST TIME. I HAVE CHECKED TO MAKE CERTAIN MY PACKET IS COMPLETE. I HAVE DOUBLE CHECKED THE FINAL SUBMISSION DATE AND AM MAILING MY PACKET BEFORE, OR ON, THE DEADLINE DATE.

6. I included a completed copy of this worksheet (make a photocopy, or use the duplicate Worksheet on the next page) with my application.

7. I mailed my completed application packet on _____

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**WORKSHEET (COPY 2)
FOR THE DOLORES “DEE” ELDRIDGE SCHOLARSHIP AWARD**

Use this worksheet/checklist to collect and organize your required documents

**A GOOD WAY TO STAY ORGANIZED IS TO PLACE EVERYTHING INTO A
LARGE FOLDER OR MANILA ENVELOPE AS YOU COMPLETE IT.**

Please double-check the applicant rules to make sure you meet the eligibility requirements.

1. I've answered all questions as best I can, and double-checked all dates and figures.
Date completed _____
2. I've filled out the Financial Statement based on my records of income and expenses.
Date completed _____
3. I've requested at least three **current** (within the last year) **signed and dated** letters of recommendation. Each has the name, address and phone number of the person giving the reference.

	Reference's name, phone & email	Date I requested the letter	Date I received the letter
One letter from employer or volunteer manager.			
One letter from instructor or professor.			
One character reference (from a friend, co-worker, etc.) who is not a relative			
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6. I included a completed copy of this worksheet with my application.

7. I mailed my completed application packet on _____

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IF YOU NEED HELP FILLING OUT THE APPLICATION OR HAVE ANY QUESTIONS AT ALL, PLEASE CONTACT ONE OF THE FOLLOWING SCHOLARSHIP BOARD MEMBERS:

Linda Horwitz – bpwnscholarship@gmail.com (530) 272-4864

Lynn Wenzel – lwinparadise1@sbcglobal.net (530) 477-0746

Judith McCarrick – gypsyjm@sbcglobal.net (530) 478-0677

Beth Volz - beth@bethvolz.com (831) 332-0100

Business & Professional Women of Nevada County

MISSION: The mission of the Business and Professional Women of Nevada County is to support and promote equity for women in all aspects of their lives.

LEGISLATIVE PLATFORM: We advocate for these issues locally, statewide and nationwide:

- Support and preserve Affirmative Action laws.
- Eliminate all forms of discrimination.
- Support reproductive freedom, including choice and access to family planning, as an absolute right for all women.
- Secure equality in all areas of employment and education, enforce pay equity, and implement comparable worth.
- Pursue equitable family laws, assist the victims of and prevent all forms of violence, assault and abuse, including sexual harassment.
- Pursue research and solutions to health and housing issues and ensure the availability of affordable, quality dependent care.
- Support the continued existence of full state funding for the California Commission on Status of Women.