

Pathway to Economic Stability Grant Application

Amount awarded: Up to \$5,000 Number of awards: TBD

This grant is administered by the Education Foundation of the Florida Federation of Business and Professional Women's Clubs, Inc. (EFFFBPW). It is made possible through the generosity of the late BPW/FL Past State President Jackie Fleener and other donors.

Grant Criteria

Applicant must:

- Be a female Florida resident at least 18 years of age
- Be enrolled in a 2-6 term certificate program at one of the 28 Florida state colleges
- Demonstrate financial need
- Remain in program to qualify for consecutive term funding

Application and essay are due by midnight November 1 and June 1, annually. Decisions are announced by December 1 and July 1.

Submit application on-line, email essay to:

**"Pathway Grant Essay"
EFPA@EducationFoundationBPWFL.org**

For questions concerning this scholarship, address email to:

"Pathway Grant Inquiry"

ALL APPLICATIONS MUST INCLUDE:

- Completed application (required fields are outlined in red)
- Emailed Essay (Typed, double spaced, 12- point)
- One reference letter from: (Educator, Employer or Community Member)

PATHWAY TO ECONOMIC STABILITY GRANT APPLICATION

**** (Required fields)**

Name:**

Age:**

Home Address:**

City:**

Zip code:**

Mailing Address, if different than above:

City, Zip code:

Phone Number:

Email: **

Annual family/household income (please select one):**

- \$0 Reported Income
- Below \$50,000
- \$50,000 - \$80,000 Above
- \$80,000

Total numbers living at home, including yourself:**

Other financial considerations which should be noted

List your school, community and/or other activities (you may submit additional sheet by email, if necessary):

Organization/Activity	Year(s)	Position Held/Involvement

Enter full name of Florida state college you plan to attend. (Address on second line):**

Have you been accepted?** Yes Have not heard yet

Intended certificate program:**

Expected time to complete program:**

Expected cost to complete program:**

List financial aid and/or scholarship that you will receive, or enter "NONE on top line:**

Financial Aid/Scholarship Name	Amount

Type an essay (500 word minimum) doubled spaced in 12-point font covering the following:

1. What are your personal and professional goals?
2. What are your long-term career plans?
3. Tell us how you would benefit from this scholarship.
4. Attach your essay to the application or email.

GRANT STATEMENT (Please check boxes to acknowledge)

I understand that:**

- (a) if my application is incomplete or does not contain all items from the required list, my application will not be considered, acknowledged, or returned,
- (b) those other than members of the EFFFBPW and BPW/FL may review my application for the selection process,

I further understand and agree that if I am chosen as a recipient the EFFFBPW and BPW/FL may use my name, college, certificate program and photo to publicize my award without any further compensation.

Typed or e'signed Applicant Signature:**

Date:**

Verify all required fields have been filled - then press: