

Imagining Possibilities Award Application

Deadline for Submission:

March 1st

Upon completion of application please mail to:

SI Chico

**P.O. Box 1812
Chico, CA 95927**

Or email to:

giving@soroptimistchico.org

INSTRUCTIONS

Please complete this application as thoroughly as possible and return it with your letters of reference, (see item #7) by the submission deadline. Additional pages may be attached to this form.

PERSONAL INFORMATION

Name:

First

Middle Initial

Last

Address: _____

Street Number

City

State

Zip Code

Email Address: _____

Phone Number: _____

CRITERIA FOR SELECTION OF SCHOLARSHIP RECIPIENT

1. What are your continuing education goals?

2. What are your plans for housing/living arrangements after emancipation?

3. Please list employment history, current employment, needs or possibilities:

4. Please list any volunteer work in which you have participated:

5. Please list any sports, music, or other activities in which you are involved:

6. Please describe your plans for shaping your future:

7. Please attach a letter of recommendation from your social worker and at least one other from a teacher, counselor, or a person not related to you.

AGREEMENT

I understand that my application and supporting information become the property of SI Chico and they shall have discretionary authority in all matters pertaining to this scholarship.

I also understand that SI Chico is aware and sensitive to issues of confidentiality regarding information contained in my application and letters of reference.

I certify that the information in this application is complete and accurate to the best of my knowledge, and I will notify SI Chico if there are any changes.

Signature of Applicant: _____ **Date:** _____