



CONNECTICUT JUNIOR WOMEN, INC.

MAUREEN BORSKI SCHOLARSHIP APPLICATION FORM

This scholarship is to be given to a female college student who will have completed at least two (2) years of college by June. This includes students in graduate programs, part-time students and students enrolled in nursing programs. She must also be participating in Community Service. This scholarship is open to any woman who may or may not be a member of a Connecticut Junior Woman's club. Previous CJW scholarship winners may apply. All information will be kept confidential.

All completed applications must be submitted to the CJW Education Chair by the **CJW March Executive Board Meeting**.

- PLEASE ATTACH TO APPLICATION:**
- ♦ A copy of your most recent transcript
 - ♦ Three letters of recommendation from outside your family
 - ♦ An essay of 2 pages or less on why you chose your field of study and your Community Service program

Name:		Telephone Number:	
Street:		Email:	
City, State, Zip:			
School Currently Attending:		Current Year of Study:	
Major Course of Study:		Academic Standing or Average:	
If Employed, please list current occupation and employer:			
School Planning to Attend:		Future Occupation:	
Marital Status:	Number of Children:	Number of siblings or children attending school:	
Total Family Income From All Sources:		Number of family members who contribute to income:	
If living at home and parents contribute to your support, please indicate how much:		If living at home, please indicate number of siblings:	

School Expenses for One Year:

Tuition:	\$
Room & Board:	\$
Books and/or Lab Fees:	\$
Other:	\$
TOTAL EXPENSES:	\$

Financial Resources for One Year:

Student's Contribution:	\$
Parent's Contribution:	\$
Husband's Contribution:	\$
Loan Program:	\$
Scholarships:	\$
TOTAL RESOURCES:	\$

Revised August 2007

Section 09 - K

Page 1 of 2

Connecticut Junior Women, Inc.

Maureen Borski Scholarship Application – page 2

Please list participation in any extracurricular activities in school or in the community:

Please check one:

If I receive a Scholarship Award, I want my award to be paid directly to the following learning institution:

Institution Name & Bursar's Office Address: _____

If I receive a Scholarship Award, I will submit receipts for books and/or tuition to CJW for reimbursement.
(Note: requests for reimbursement must be received within 6 months of the original award date.)

I declare that the information in this application is true to the best of my knowledge.

Signature: _____ **Date:** _____

CJW Club Submitting Application: _____

FOR CJW USE ONLY:

Date Application Received:

Application Review Information:

--