



Business Women's Network of Howard County
Life Long Learner
Scholarship Application Form

Applicant:

Name: _____

Address: _____

Phone: _____ Cell: _____

Email address: _____

High School:

Name: _____

City and State: _____

Year of Graduation (or GED granted): _____

Institution You Expect To Attend Or Are Currently Attending:

Name: _____

Address: _____

Course of Study: _____

Anticipated Enrollment Date or date started: _____

Essays:

On a separate paper, answer the following questions. Please print clearly or, if possible, type using a 12-point font. Both essays together should be a minimum of one page and a maximum of two pages.

1. Describe an activity (work, school, community) in which you have demonstrated leadership and commitment.
2. Professionally, what is your ten-year goal, and how do you plan to achieve it?
3. **Optional:** Is there anything you would like the evaluation committee to know about your financial situation?

Recommendations:

Provide the names of the two people who are completing your Recommendation forms. Please ask people (other than relatives) who are familiar with your work, school or community activities.

1. Name: _____

Relationship: _____

2. Name: _____

Relationship: _____

Applicant's Signature: _____

Date: _____

Please note: Your application must be post marked by April 19, 2010.

Please send it to:

BWN, P.O. Box 2575, Columbia, Maryland 21045-2575



Business Women's Network of Howard County
Life Long Learner
Scholarship Recommendation Form

Person Writing Recommendation: _____

Address: _____

Phone: _____

Email: _____

Name of Applicant: _____

Relationship to Applicant: _____

On a scale of 1 to 5 (1 being the lowest and 5 being the highest), how would you rate the Applicant relative to her peers in these categories?

Commitment to Education: _____

Goal Setting Ability: _____

Leadership Skills: _____

Potential for Success: _____

Please add any information about the Applicant that you would like to bring to the attention of the Evaluation Committee. Please use the back of this form or add a separate page. Thank you.

Please return this form in a sealed envelope to the Applicant to be included in her Application Package.

The application must be post marked by April 19, 2010.

Thank you for participating in this process.



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