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| **Ashley Marie Abraham Scholarship Application**  |  |

**Amount of Award:** One non-renewable scholarship of $2,000 shall be awarded.

**Who May Apply:** Female high school seniors attending Oshkosh North or Oshkosh West high schools who will pursue a degree in nursing or pre-medicine at a college or university in Wisconsin, including technical colleges.

**Basis for Selection:** Recipient will be a young woman with a 3.5 minimum grade point average, a strong academic record, and demonstrated school involvement and community service.

**How to Apply:** Complete this form **and return it with the requested attachments** by **March 15** to **Women’s Fund for the Fox Valley Region, 4455 W. Lawrence Street, Appleton, WI 54914. The application and all attachments may also be submitted via email to grants@womensfundfvr.org.**

## Personal Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |       |       |       | Date: |       |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |       |       |
|  | Street Address | Apartment/Unit # |

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| --- | --- | --- | --- |
|  |       |       |       |
|  | City | State | ZIP Code |

|  |  |
| --- | --- |
| Email: |       |

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| --- | --- | --- | --- | --- | --- |
| Date of Birth: |       | Home Phone: |       | Cell Phone: |       |

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| Parent(s) Name(s): |       |

## Required Attachments

**Include the following attachments:**

1. Write a brief essay to tell us about yourself and why you want to major in nursing or pre-medicine.
2. Three letters of recommendation from non-relative adults – at least one from a teacher
3. High school transcript which includes the first semester of your senior year.
4. Letter of acceptance from the post-secondary school you will attend.
5. Activities Form (page 2 of this application)

|  |  |  |  |
| --- | --- | --- | --- |
| Student Signature: |       | Parent or Guardian Signature: |       |

**Return application and requested attachments by March 15 to Women’s Fund for the Fox Valley Region:**

**4455 W. Lawrence Street**

**Appleton, WI 54914**

**4455 W. Lawrence Street OR** **grants@womensfundfvr.org**

**Appleton, WI 54914**

**Use this chart to list extra-curricular activities, work experience, and community service.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity** | **Dates of Participation** | **Awards & Honors** | **Leadership/Offices Held** |
|       |       |       |       |
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In the space below describe which of the activities in which you participated is most important to you and why.

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