



SF/Business and  
Professional  
Women

January 31, 2017

TO: Financial Aid Advisors and College Students as of Fall 2017

The Sioux Falls Business and Professional Women's Organization is offering \$500.00 scholarships to women pursuing a post secondary education. Both traditional and non-traditional students are eligible to apply.

A copy of the BPW scholarship application is enclosed. Please feel free to make copies of the application as needed.

The application should be self-explanatory with a **May 1, 2017, deadline**. If you or any applicant has any questions or concerns, please find contact information below.

Sincerely,

Lori Sisson  
(605) 201-8513  
sfbpwscholarship@gmail.com  
Scholarship Committee Chairperson 2017  
Sioux Falls Business and Professional Women



**SF/Business and Professional Women**

*Business & Professional Women (BPW) is a non-profit organization enhancing the business and leadership potential of all women through networking, professional and personal development.*

**SCHOLARSHIP INFORMATION**

- ❖ This scholarship is for women pursuing a post-secondary education.
- ❖ Selection is based on a combination of demonstrated academic excellence and financial need.
- ❖ **Application Deadline: May 1, 2017**
- ❖ Award: \$500.00

Have you ever been a recipient of a scholarship provided through BPW?  Yes  No  
If yes, when \_\_\_\_\_

**\*\*Please type or print all information; all questions must be answered.\*\***

**I. STUDENT INFORMATION**

1. Name: \_\_\_\_\_
2. Permanent address (include address, city, state & zip): \_\_\_\_\_  
\_\_\_\_\_
3. Phone: ( ) \_\_\_\_\_
4. Email: \_\_\_\_\_
5. Age: \_\_\_\_\_
6. Parent or guardian (if you are a dependent): \_\_\_\_\_

**II. PROGRAM FOR WHICH SCHOLARSHIP IS REQUESTED**

7. Have you been accepted into the program for which the funds are requested?  Yes  No
8. Name & address of school: \_\_\_\_\_
9. What type of institution will you be attending?  
 Vocational/Technical  Community/ Jr. College  University/College
10. Will your academic schedule be  Full-time  Part-time (If part-time, how many credit hours will you take during the academic year supported by the scholarship? \_\_\_\_\_)
11. Field of study: \_\_\_\_\_
12. Starting date of classes: \_\_\_\_\_ 12. Degree type/date expected: \_\_\_\_\_

**III. EDUCATIONAL HISTORY**

13. Educational level:	<u>High School</u>	<u>College/Vocational</u>	<u>Graduate/Professional</u>
	9 10 11 12	1 2 3 4	1 2 3 4

14. High school attended: \_\_\_\_\_ (GED  Yes  No) GPA: \_\_\_\_\_

15. College/vocational school attended: \_\_\_\_\_ GPA: \_\_\_\_\_

*(Please attach a transcript from each institution attended)*



## VII. PERSONAL & CAREER GOALS

Please describe your personal and educational aspirations, as well as career goals.  
You may attach additional sheets, if necessary.

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## VIII. REFERENCES

*Please include at least one teacher or school counselor as a reference.*

1. \_\_\_\_\_

2. \_\_\_\_\_

*Name*

*Address*

*Phone Number*

## IX. CERTIFICATION

I hereby acknowledge that all of the information included in this application packet is true and complete to the best of my knowledge. I understand that this application packet will not be considered for review unless all requested materials are enclosed and the application is signed and dated. I understand that, due to funding limitations, not every eligible applicant will receive an award. I also understand that all applications will be held confidential, but no application material will be returned.

\_\_\_\_\_  
*Student's signature*

\_\_\_\_\_  
*Student's name (print)*

\_\_\_\_\_  
*Date*

**Send your completed application to [sfbpwscholarship@gmail.com](mailto:sfbpwscholarship@gmail.com).**

**-or-**

**Lori Sisson, Farm Credit Services of America, PO Box 88737, Sioux Falls, SD 57108**

**\*\*If you have any questions, please consult with your school counselor or financial aid officer.\*\***