



# Zonta District 10

Build a Better World for Women and Girls

## Rose Award

District 10

Zonta Award

For a Non-Traditional Student

### **SELECTION CRITERIA:**

1. Recipient must be a single female parent Head of Household (as defined by IRS definition), who is the primary wage earner of the family.
2. Applicants should be individuals pursuing post high school training or certification programs not necessarily requiring a baccalaureate degree.
3. The recipient must use the award to attend an educational institution that is accredited and normally maintains a regular faculty and curriculum and normally has a regularly enrolled body of students in attendance at the place where its educational activities are regularly carried on. This award can fund a certification program such as law enforcement or fire training education at a technical/trade school or a community college.
4. Financial need is determined by consideration of annual family income.
5. Recipient must be a resident of the Zonta International District 10 (to include those areas where a member of e-Club of USA2 resides).

\*Classified members (club members and individuals with direct membership with Zonta International) and employees of Zonta International and Zonta International Foundation, and their family members (ancestors, descendants, adoptees, siblings, nieces or cousins, and those of their spouse or co-habiting partner) are not eligible to apply.

### **APPLICATION PROCEDURES:**

1. Complete the award application fully and neatly and submit as a PDF preferably by email.
2. Enter your name on all evaluation forms.
3. Solicit letters of recommendation from three people not related to you who know you well. Have references send the forms directly to the Zonta contact listed below before the deadline.
4. Prepare the "Financial Fact Sheet" documenting a proof of need, and turn it in with your completed application to the Zonta contact before the deadline
5. Submit a completed copy of the family's **Income Tax** return used in preparing the "fact sheet."

### **SELECTION COMMITTEE:**

The Zonta International District 10 Award/Scholarship committee is comprised of members of the Zonta International District 10 membership.

### **AWARD:**

The award is \$1,000 paid to the recipient for any expenses that support the achievement of post high school training or certification programs not necessarily requiring a baccalaureate degree.

**DEADLINE: April 1, 2024**

**Contact:**

[zontadistrict10@gmail.com](mailto:zontadistrict10@gmail.com)

**PERSONAL DATA:**

Name of Student \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Dependents \_\_\_\_\_

Names and ages of dependents \_\_\_\_\_

Citizenship (for tax purposes): United States \_\_\_\_\_ Other \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

High School: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

School Presently Attending: \_\_\_\_\_

Address: \_\_\_\_\_

Current Year: \_\_\_\_\_ Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior

Cumulative Grade Point Average: \_\_\_\_\_ Expected Date of Graduation: \_\_\_\_\_

**FINANCIAL DATA :**

Do you receive income from your family (parent(s) or child support) ? \_\_\_\_\_ Monthly amount \_\_\_\_\_

Are you presently receiving financial assistance from any other source? \_\_\_\_\_

Please disclose source and amount: \_\_\_\_\_

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Employer: \_\_\_\_\_ Salary: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Please attach the required **financial data sheet** and most recent **IRS return**.

**WORK EXPERIENCE:** List below all work experience starting with the most recent.

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

**COMMUNITY SERVICE ACTIVITIES:** Please list all the community activities in which you have been involved.

**REFERENCES:**

List names and addresses of persons submitting references:

Academic Reference

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Employer Reference (current or former)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Character Reference

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**STATEMENT OF ECONOMIC NEED AND CAREER PLANS:** Please attach (300 words or less) a paragraph that describes your career and educational goals and a statement of need for financial assistance.

**FINANCIAL FACT SHEET**

Student Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Have you enclosed your most recent income tax return? \_\_\_\_\_

If you are dependent on your parent(s) for support complete Section A. If you are independent from the support of your parent(s) complete Section B.

**Section A: (If dependent on parents for support)**

Total number of exemptions for family: \_\_\_\_\_  
Adjusted gross income of family \$ \_\_\_\_\_  
Income tax paid \$ \_\_\_\_\_  
Income earned by father: \$ \_\_\_\_\_  
Income earned by mother: \$ \_\_\_\_\_  
Parent's marital status: \_\_\_\_\_  
Number of members in the family: \_\_\_\_\_  
Number of family members in college: \_\_\_\_\_  
Other family untaxed income or benefits: \$ \_\_\_\_\_  
Student's income earned from work \$ \_\_\_\_\_  
Student's other untaxed income or benefits \$ \_\_\_\_\_

**Section B: (If not dependent on parents for support)**

Total number of exemptions for family: \_\_\_\_\_  
Adjusted gross income of family \$ \_\_\_\_\_  
Income tax paid \$ \_\_\_\_\_  
Income earned by work of applicant: \$ \_\_\_\_\_  
Number of dependent children: \_\_\_\_\_  
Child support received: \$ \_\_\_\_\_  
Student's other untaxed income or benefits \$ \_\_\_\_\_  
Student's cash, savings, and checking: \$ \_\_\_\_\_  
Student's real estate and investment value (other than home) \$ \_\_\_\_\_  
Student's real estate and investment (Other than debt) \$ \_\_\_\_\_  
Student's business value: \$ \_\_\_\_\_ Student's business debt: \$ \_\_\_\_\_