



GENERAL FEDERATION of WOMEN'S CLUBS MASSACHUSETTS

T Jablanski, President



2024 BOSTON CITY FEDERATION SCHOLARSHIP **for WOMAN RETURNING to SCHOOL starting at \$500**

Application Form (Print/Type)

Name _____ Age _____
Optional

Address _____ Tel. # _____

City, Zip Code _____ E-mail _____

College(s) attended: _____

Degree received Yes No Graduation year: _____

College(s) to which you have applied:

_____ Accepted: Yes

_____ Accepted: Yes

Signature: _____ Date: _____

QUALIFICATIONS: Woman maintaining legal residence in Massachusetts and returning to college after an absence of at least four years.

REQUIREMENTS:

1. Completed application form postmarked no later than **March 1, 2024**.
2. Personal statement of not more than 500 words addressing your personal and professional goals. Word count on statement must be provided.
3. Letter of reference from your recent employer or mentor in your field of study.
4. Copy of Massachusetts driver's license.
5. Official transcript with grades.

SEND ENTRY TO:

GFWC Massachusetts Scholarship Chairman
P. O. Box 679
Sudbury, MA 01776-0679
Attention: Return to School Scholarship

If you have any questions or for further information, please email:
Robin O'Connor, Scholarship Chairman, Scholarships@gfwcma.org

Failure to comply with the above requirements will result in disqualification.