



# GENERAL FEDERATION of WOMEN'S CLUBS MASSACHUSETTS

T Jablanski, President



## **2023 COMMUNICATION DISORDER/SPEECH THERAPY SCHOLARSHIP** **for GRADUATE STUDY starting at \$500**

Application Form (Print/Type)

Name \_\_\_\_\_ Tel. # \_\_\_\_\_

Address \_\_\_\_\_

City, Zip Code \_\_\_\_\_ E-mail \_\_\_\_\_

College(s) attended: \_\_\_\_\_

College(s) attended: \_\_\_\_\_

Degree received and graduation year: \_\_\_\_\_

Graduate school(s) to which you have applied:

\_\_\_\_\_ Accepted: Yes

\_\_\_\_\_ Accepted: Yes

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**QUALIFICATIONS:** Applicant maintaining legal residence in Massachusetts.

### **REQUIREMENTS:**

1. Completed application form postmarked no later than **March 1, 2023**.
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 academic advisor or college professor (original on school letterhead.)
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: Comm Disorders / Speech Therapy Scholarship

If you have any questions or for further information, please email:  
**Robin O'Connor, Scholarship Chairman at [Scholarships@gfwcma.org](mailto:Scholarships@gfwcma.org)**  
Failure to comply with the above requirements will result in disqualification.