GENERAL FEDERATION OF WOMEN'S CLUBS OF MASSACHUSETTS
Terry Rouvalis, President

MEMORIAL EDUCATION SCHOLARSHIPS
for **GRADUATE STUDY 2027**

Field Honoring Past State President Jen Nowak

Business Administration in Economics or Finance

To apply, provide a packet to include the completed APPLICATION FORM below along with the following:

1. **Personal Statement** not more than 500 words addressing professional goals and financial need.
2. **Official transcript(s)** from all colleges/graduate schools attended.
3. **Letter of Reference** from college department chair or recent employer (on official letterhead).
4. **Copy of Massachusetts Driver's License or Massachusetts Identification Card.**
5. **Personal Resume.**
6. **Confirmation of acceptance** to a graduate level program, if received. (If selected as a recipient, copy of acceptance must be provided to GFWC MA Treasurer before scholarship check is issued.)

SUBMIT BY EMAIL: It is preferred that you send all required documents electronically as pdf or Word docs. Email documents to HQ Secretary, Headquarters@gfwcma.org by March 1, 2027 and put the scholarship title you are applying for in the subject line.

Eligibility: Graduate applicant maintains legal residence in Massachusetts

Amounts awarded: **at least $3000**

SUBMIT BY MAIL: Send all materials in ONE envelope to GFWC MA Memorial Education Committee, P. O. Box 679, Sudbury, MA 01776-0679; Attention: Memorial Ed Scholarship. **All entries must be received by March 1, 2027.**

Interviews: Applicants will receive confirmation that materials have been received. Candidates chosen as finalists will be contacted by **March 15, 2027** to schedule a remote or in-person interview with the Selection Committee. **Target date for interviews**: **March 20, 2027**.

2027 MEMORIAL EDUCATION SCHOLARSHIP APPLICATION FORM

Name_____ Tel _____

Address_____ City _____ ZIP _____

How many years living in Massachusetts? _____ Yrs. Email _____

Undergraduate degree received from _____

Date received _____ Degree Type/Program _____

Graduate school(s) to which you have applied:

_____ Accepted: Yes ❑

_____Accepted: Yes ❑

Expected graduation date and major: _____

Additional information about financial needs (include other aid applied for/received, program costs)

_____

_____

X SIGNATURE_____ DATE_____

Questions may be directed to Graduate Scholarship Chairman Lynne Stader: Lynne@stader.org