



AAUW (American Association of University Women)
FREEHOLD AREA BRANCH
APPLICATION FOR
LEW WILLIAMS AND LEILA SULKES
SCHOLARSHIPS
(2016-2017 Academic Year)

The mission of AAUW (American Association of University Women) is to advance equity for women and girls through advocacy, education, philanthropy, and research.

Please be aware that previous Lew Williams and Leila Sulkes Scholarship winners are not eligible to apply. You must have your completed application, official college transcript(s), and letters of recommendation mailed separately AND directly to the address below. Submissions must be postmarked by July 31, 2016. Mail to

AAUW Scholarships, PO Box 6052, Freehold, NJ 07728

The award check will be made out to the school.

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(2016-2017 Academic Year)

NAME _____

Last

First

Middle

ADDRESS _____

PHONE _____

EMAIL _____

BIRTH DATE _____

CIRCLE DEGREE YOU ARE PURSUING: BACHELORS MASTERS

TOTAL CREDITS EARNED BY 05/31/16 _____

CUMULATIVE GRADE POINT AVERAGE _____

ACCREDITED SCHOOL YOU WILL BE ATTENDING IN SEPTEMBER

ACCREDITED COURSE OF STUDY (must be a matriculating student)

EXPECTED DATE OF GRADUATION _____

6. Please arrange to have two current Letters of Recommendation, on official LETTERHEAD, mailed DIRECTLY to the address above. The letters should be from a college advisor, faculty member, community/volunteer organization, or employer. Letters should not be from relatives and/or friends

Do not include Letters of Recommendation with your application.

7. Please have official copies of your undergraduate and/or graduate college transcripts* mailed DIRECTLY to the Freehold AAUW Scholarship address.

Do not include official transcript(s) with your application

* If you have completed a minimum of 6 graduate credits, then the graduate transcript will suffice

Have you ever received an AAUW award? If so, when _____

Name of AAUW branch that provided award _____

How did you learn about these scholarships? _____

I hereby state that all of the information given on this application is true to the best of my knowledge.

Signature _____ Date _____