



## Career Advancement Scholarship

### Information for Scholarship Applicants

The BPW/Maine Futurama Foundation awards a scholarship for \$3,000 to a woman at least thirty (30) years of age who is enrolled in, or returning to, an accredited college or training program of study, either full or part-time.

The BPW/Maine Futurama Foundation Career Advancement Scholarship is designed to assist a student in meeting educational expenses. The scholarship is awarded for full-time or part-time programs of study and may cover academic or vocational/paraprofessional business training. The scholarship payment will be made directly to the school to be applied to the second academic semester. The Maine Community Foundation will send a check in December to the school/college; if a student is still enrolled, both school/college and student must sign the check.

### Criteria

The applicant must meet the following requirements:

- Be at least thirty years of age and a Maine resident.
- Need financial assistance to improve skills or to complete education for career advancement.
- Have a definite plan to use the desired training in a practical and immediate way to improve chances for advancement, to train for a new career field, or to enter or re-enter the job market.
- Provide information about the specific course of study at an accredited school and be qualified as an applicant for the course.
- Be officially accepted into the program or course of study.

### Requirements

Applications should include the following items, submitted in a single email, with all required documents combined into one PDF file (do not send multiple documents or emails):

1. Completed application form, **with statement of financial need signed by a Financial Aid Official**. See Page 2. Please download and save the fillable application form to your desktop before typing in your responses.
2. Copy of transcripts(s) from the school(s) or college(s) attended.
3. Verification of acceptance from the college or school. Verification of enrollment could be document/form from dean or registrar to include that student is in good standing. If transfer student, could use "commonapp.org"
4. Two letters or recommendation pertinent to this application. These may be from school officials, teachers, employers, or other persons not related to the applicant.
5. A statement by the applicant describing educational, personal and career goals.

Only applications that include all required materials combined into a single pdf will be considered.

The deadline for completed applications is **April 15**. Late applications will not be considered.

Please email all application materials as a single, combined PDF to **FuturamaFoundation@gmail.com**

The current application form is available on the Futurama Foundation's website: <https://bpwmeffoundation.org/>



Career Advancement Scholarship Application

Name: \_\_\_\_\_ Age: \_\_\_\_\_
Mailing Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
City, State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Enrolled Dates: \_\_\_\_\_ Grad Date: \_\_\_\_\_
College Attending: \_\_\_\_\_ Expected Grad Date: \_\_\_\_\_
Major/Area of Study: \_\_\_\_\_ Attending Full Time \_\_\_ Part Time \_\_\_
If a program other than college, please describe: \_\_\_\_\_

Current Employer: \_\_\_\_\_
Annual Income: \_\_\_\_\_ Amount of Income/Savings used for educational expenses: \_\_\_\_\_
Marital Status: \_\_\_\_\_ If married, please provide combined annual income: \_\_\_\_\_
During the school year, where will you be living? At home: \_\_\_ On Campus: \_\_\_ Off Campus: \_\_\_

List family members attending college (i.e., siblings, children, spouse/partner):

Table with 3 columns: Siblings, Children, Spouse/Partner; Institution Enrolled; Age

Note: If you have additional information relevant to this application, please submit a separate document detailing it. For example, medical circumstances or unusually high childcare costs.

Statement of Financial Need for the Ensuing Academic Year

Financial Aid Award for Academic Year

Total Grant Funds: \$ \_\_\_\_\_
Total Scholarships: \$ \_\_\_\_\_
Total Direct Loans: \$ \_\_\_\_\_
Total Private Loans: \$ \_\_\_\_\_
Other Aid: \$ \_\_\_\_\_
TOTAL All Financial Aid: \$ \_\_\_\_\_

Estimate Estimated Expenses

Tuition/Fees: \$ \_\_\_\_\_
Books/Supplies: \$ \_\_\_\_\_
Room/Board: \$ \_\_\_\_\_
Travel/Miscellaneous: \$ \_\_\_\_\_
TOTAL Expenses: \$ \_\_\_\_\_

Effective Family Contribution (Student portion): \_\_\_\_\_ Effective Family Contribution (Parent portion): \_\_\_\_\_

Name of Financial Aid Official or School Counselor: \_\_\_\_\_
Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby apply for the above scholarship and agree to conform to all the regulations governing it.
The above statements are certified to be true and correct to the best of my knowledge.

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