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**2018 MYRTLE LEE FOR MOMS SCHOLARSHIP:**

**$1, 500 scholarship for single women with children**

**who are furthering their post high school education**

**Offered through the Minneapolis Club of Zonta International**

**Application also posted on our website: www.zontaminneapolis.org**

**Application must be postmarked or emailed by July 27, 2018**

**Awards will be notified before end of August**

Myrtle Lee was a former president of the Minneapolis Club of Zonta International. When she passed away her son donated money to the Zonta Minneapolis Club to start a scholarship fund in her name. Myrtle strongly supported single women with children who want to continue their post high school education. The members of the Minneapolis Club have continued to honor and respect Myrtle Lee’s views regarding the education of single mothers.

The Myrtle Lee scholarship is designed to recognize women who display excellence in character and perseverance, personally and professionally. Applicants must be accepted or be participating in a post secondary program. Additionally, they must be a parent and maintaining employment. The scholarship winners will be selected by a review committee who will rate applications based on financial need, quality of written submissions, and overall personal and professional summary.

Please submit your application and one letter of reference to:

Zonta Service Committee

C/O Lynne Jensen

1039 Pennsylvania Ave N

Golden Valley, MN 55427

Or I would prefer you email to me at lynne@balancedlifesolutions.org

The deadline is July 27, 2018

MINNEAPOLIS CLUB OF ZONTA INTERNATIONAL
MYRTLE LEE FOR MOMS SCHOLARSHIP APPLICATION FORM:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Middle Initial Last

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip

Telephone:

(\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Work

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Children: \_\_\_\_\_\_\_ Age(s) of Children: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Educational Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Post-Secondary School or University you are or will be attending:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Start Date of Post Secondary School: \_\_\_\_\_\_\_\_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_

Area(s) of Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current G.P.A. (if applicable): \_\_\_\_\_\_\_\_\_

Name, phone number, email of contact at your postsecondary institution who can

verify your admission status:

Name :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address of person able to verify enrollment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Educational Background:

High School Attended:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ G.P.A.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you did not graduate, when did you receive your GED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MINNEAPOLIS CLUB OF ZONTA INTERNATIONAL
MYRTLE LEE SCHOLARSHIP APPLICTION FORM, continued:

**Current Work Experience:**

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Email address of direct supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Average hours per week work: \_\_\_\_\_\_\_\_

**Current Finances:**

Average Monthly Income: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Include salary/wages, regular gifts, scholarships, or additions)

Average Monthly Expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_

(Include medical, rent, childcare, educational expenses, transportation)

Do you now or will you be receiving Financial Aid or additional scholarships:

Yes\_\_\_\_\_ No\_\_\_\_\_

If so, how much money do you anticipate receiving per year? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal Statements:**

**Please attach written responses to the following questions, 200 words or less per question:**

1. What are your personal and professional goals? Where do you see yourself in five years?

2. How do you think this scholarship will help you achieve your goals?

3. What life experiences have defined you and prompted you to complete your post-secondary education degree? Why have those experiences been significant to you?

Application must be postmarked by July 27, 2018

Zonta Service Committee

C/O Lynne Jensen,

1039 Pennsylvania Ave N

Golden Valley, MN 55427

Submit electronically by same date to lynne@balancedlifesolutions.org