



American Association of University Women-Easton Branch
2023 Mature Woman's Grant Application

Eligibility: Women, ages 25 and over; residents of: Caroline, Dorchester, Kent, Queen Anne's, or Talbot County; and accepted at an accredited educational institution

Applications: Must be postmarked or e-mailed by June 5, 2023.

Submit applications to:

AAUW Grant Committee
28410 Pinehurst Circle
Easton, MD 21601

Email: aauwgrant@goeaston.net

Please type or print clearly; illegible applications will not be considered.

Name: _____ Date of Birth: _____

Home Address: _____

Phone: (home) _____ (work) _____

Email: _____

Educational Background (if level not completed, please indicate major and credit hours or courses completed; e.g. Criminal Justice, 6 hours):

High School _____

Date completed _____ Grade Point Average _____ Type of Diploma Granted _____

Undergraduate School _____

Date completed _____ Grade Point Average _____ Type of Degree Granted _____

Graduate School _____

Date completed _____ Grade Point Average _____ Type of Degree Granted _____

Certificate or Other School _____

Date completed _____ Grade Point Average _____ Type of Certificate/Recognition Granted _____

Applying for grant to assist with coursework in (check one):

Associate Certificate Undergraduate Graduate

For Chesapeake College nursing program application, please indicate number of prerequisites credits earned. _____

Where will you be studying in the fall of 2023? _____

Have you been accepted for the fall semester 2023? YES _____ NO _____

Currently enrolled? Please provide an official transcript

School/Program _____ **Grade Point Average** _____

(If chosen, applicant must provide proof of enrollment prior to receiving award)

Purpose of studies: (Please indicate how the knowledge gained will be used in your community.)

Describe your professional and/or volunteer activities that relate to the educational development and equality of women and girls.

Outline your educational, career and long range goals:

Statement regarding your financial need: (Please be as specific as possible; all financial information will be kept confidential.)

How did you hear about this grant opportunity? _____

(Please feel free to submit additional pages if the space provided is not sufficient.)

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The information provided is accurate to the best of my knowledge. In the event that I cannot continue my studies, I agree to refund to AAUW any grant money received.

Applicant's Signature

Date

(if submitted electronically, indicate concurrence here)

AAUW Mission Statement: AAUW advances equity for all women and girls through advocacy, education, philanthropy and research