

application

Please send completed form and all support documents to:

YWCA Gardena Valley
1341 West Gardena Blvd.
Gardena, California 90247

YWCA Gardena Valley

June Gerber Educator Scholarship Application for Gardena Women

Full name and social security number must be indicated on all documents.

DUE on or before April 10. (delivered or postmarked)

Applying for: \$4,000 2-year scholarship \$8,000 4-year scholarship

Name _____ SS# _____

Home Address _____

City _____ State _____ Zip _____ DOB _____ US Citizen ___yes___no

Home Phone _____ Cell _____ e-mail _____

List all schools attended _____ Graduated _____

Name and Location	Dates of Attendance	Cum. GPA
_____	_____	_____
_____	_____	_____
_____	_____	_____

List community service, clubs, school activities, awards, etc _____

Estimated Gross family income _____ Number in household (self included) _____

Full name of father or guardian _____ (living___) (deceased___)

Occupation of father or guardian _____

Address, if different from your own _____

Full name of mother or guardian _____ (living___) (deceased___)

Occupation of mother or guardian _____

Address, if different from your own _____

Name of college/university attending _____

Address _____ City _____ State _____ Zip _____

Anticipated term(s) of enrollment: Summer 20___ Fall 20___ Spring 20___

Please indicate any other sources of support you already have or may receive:

Tuition Assistance Employment, anticipated hours/week _____

Other Scholarships _____

Signature _____ Date _____

(Mail to YWCA Gardena Valley at 1341 W. Gardena Blvd., Gardena 90247 On or Before April 10th)

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