

# SCHOLARSHIP APPLICATION Due Friday April 25, 2025

#### **ELIGIBILITY REQUIREMENTS**

- 1. An applicant must be a young woman who has exhibited an interest or association with the game of golf.
- 2. An applicant must establish financial need by submitting copies of the FAFSA (Free Application for Federal Student Aid), SAR (Student Aid Report), her parent's and her personal income tax returns, and financial aid decisions
- 3. An applicant must have applied to or attend a university, college or accredited trade school.
- 4. An applicant must demonstrate scholastic ability by submitting SAT and/or ACT scores and high school and/or college transcripts.
- 5. An applicant must be of outstanding character, integrity and leadership.
- 6. An applicant must reside in the area covered by the Women's Metropolitan Golf Association. That area is within a 60-mile radius of NYC limits and the entirety of Long Island.
- 7. An applicant must be available for a personal interview with a member of the Foundation Board.

#### **INSTRUCTIONS**

- Fill out this application form and submit it to the WMGA Foundation via email: scholarshipapp@wmga.com. The application must be received <u>no later than Friday, April 25, 2025</u>. You will receive an email from the Foundation confirming receipt of your application.
- 2. Upload the following supporting documents to this application form:
  - a. High School transcript.
  - b. SAT and/or ACT scores.
  - c. College or trade school transcript (if applicable).
  - d. Copy of FAFSA filed with the Federal Student Aid Programs \*
  - e. Copy of SAR result of FAFSA with EFC number.
  - f. Copy of the first two pages of applicant's and her family or guardian's most recent (2022 or 2023) Federal Income Tax Return (showing total gross income and signature page).
  - g. Copy of financial aid decisions i.e., grants, loans, work study, etc. (as soon as you receive them.)
  - h. Two letters of recommendation (see item #4).
  - i. Common Application Essay.

#### **GENERAL INFORMATION**

If the application is not submitted by the due date, it cannot be con-sidered but may be resubmitted for consideration the following year. Applications are reviewed in May and recipients are notified no later than June 16<sup>th</sup>.

<sup>\*</sup> Please file the FAFSA as soon as you can after January 1. Once processed, you will receive the SAR in six weeks. The FAFSA may be obtained from high school guidance office, college financial aid office, website www.fafsa.ed.gov, or call 800-4 FED AID.

Each scholarship is applicable to qualified educational expenses, including tuition, incidental fees, and books. The scholarship is awarded for a specified number of semesters that is determined by the WMGA Foundation selection committee. The schol-arship is subject to the student's continuation in school and to the continuation of the student's financial need. If a recipient does not enter school within one year of receiving an award, or leaves school at any time thereafter, any scholarship award may be canceled, and the applicant may need to reapply for further assistance. Scholarship awards are made payable to the student; however, the student's academic verification and school transcript must be submitted in a timely manner to the Foundation each semester or the applicant will forfeit the award. Any scholarship payments not used in a manner consistent with the terms of the scholarship award are to be returned to the Foundation. All information received by the Foundation will be kept confidential.

#### **TELL US ABOUT YOURSELF: (Type or Print in Ink)**

1. PROFILE:				
Name of applicant Last		First		Middle
Home address				
Nu	mber and street	Apt/Floor	City	State Zip Cod
Home phone # (	_) Cell p	hone # ()	E-mail add	dress
Date of birth				
2. EDUCATION:				
List the <b>High Schools</b>	you have attended:			
Name and Location	Date Entered	Date Left	Diploma or Degree received	Reason for leaving If other than graduation
List the <b>Colleges, Univ</b>	versities, Trade Schools	s or Graduate Scl	nools you have attende	d or currently attend:
Name and Location	Date Entered	Date Left	Diploma or Degree received	J

hat <b>College, University, Trade School or Graduate School</b> will you be attending? (If you have one or more schools on are considering, list those schools in order of preference – list school names and indicate the date your applica-
on was filed.)
dicate the subject(s) in which you plan to specialize:
dicate the professions you think you might be interested in pursuing upon graduation:
andardized test scores:
ACT composite score: OR SAT superscore:

#### HELP US GET TO KNOW A BIT MORE ABOUT YOU:

### 3. EXTRACURRICULAR ACTIVITIES AND COMMUNITY SERVICE (List in order of importance to you)

Name of Club, Activity, Team or Organization (i.e. Student Govern- ment)	Your role (in- clude any leader- ship roles held by you) (i.e. Participant; Vice-President in my senior year)	Dates of Involvement (i.e. 11 <sup>th</sup> and 12 <sup>th</sup> grades or 9/2022 – 6/2024)	How many weeks per year are you involved and how many hours per week do you spend (i.e. 32 wks per yr./ 3 hrs per wk)	Description of Club, Activity, Team or Organization (i.e. The Student Government is an organization of students working to represent the diverse interests and needs of all students and the community and to promote civic responsibility)

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## 4. RECOMMENDATIONS.

For example, a reference might be a teacher, coach, counselor, employer, etc.			
Name	Title	Telephone Number	Email Address
	ney have come to kno		you. In that letter, he or she should also om your classmates. Please submit each
5. GOLF RELAT	ED ACTIVITIES.		
Tell us briefly a	bout your golfing acti	vities and/or your association with gol	f:
How did you he	ear about the WMGA	Foundation?	
Have you ever p	participated in a " <i>Girl</i> s	s to the Tee" event? If so, when:	
Have you ever	nlaved in a WMGA To	irnament? If so, when:	

Give two personal references (not related to you) that are mature persons and have known you for several years.

# 6. Getting to Know You What is your favorite movie and why? Optional: Please add any additional information that you may feel may be helpful. You may add additional pages if needed. **TELL US ABOUT YOUR FAMILY:** 7. BACKGROUND AND FINANCIAL INFORMATION Parent's name: Parent's name: Parent's occupation: \_\_\_\_\_ Parent's occupation: \_\_\_\_\_ Parent's employer: \_\_\_\_\_ Parent's employer:\_\_\_\_\_ Parent's gross income in 2023:\_\_\_\_\_ Parent's gross income in 2023:\_\_\_\_\_ Address: Email: \_\_\_\_\_ Residence: Do your parents: [ ] Own <u>or</u> [ ] Rent List clubs you or your parents belong to – private/social: Number of brothers and sisters \_\_\_\_\_ Ages of brothers and sisters \_\_\_\_\_

Number of brothers and sisters \_\_\_\_\_\_ Ages of brothers and sisters \_\_\_\_\_\_ Number in college \_\_\_\_\_ Number graduated college \_\_\_\_\_ Has any member of your family received a WMGA Scholarship? [ ] Yes [ ] No

If yes, please list name, school and year \_\_\_\_\_ What is the cost of tuition per semester, including room and board, at the school you will be attending in the fall?

PARENT'S/GUARDIAN'S ENDORSEMENT:  As the parent or guardian of the applicant, I hereby declare that the estimated dollar amount I (we) expect to contribute per semester to the applicant's cost of school is \$, and that:  1. I have read the foregoing application for a WMGA Scholarship as filled out by the applicant.  2. That the answers given are true and correct.  3. That I approve this application for scholarship aid.  Parent's/Guardian's signature Date  Address  APPLICANT'S DECLARATION:  I declare that the answers given in this application for a WMGA Foundation Scholarship are true to the best of my knowledge.  Applicant's signature Date  Reminder _ Please remember to attach the following supporting documents:  O High School transcript. O SAT and/or ACT scores.	Please be specific and identify the source of all mor	ney you will be receiving (i.e. \$5,000 per semester in merit schol-
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