GENERAL FEDERATION OF WOMEN'S CLUBS ILLINOIS Scholarship Application 2025



GFWC Mission Statement:

GFWC is a philanthropic organization dedicated to community improvement by enhancing the lives of others through volunteer service. This year, GFWC Illinois will award scholarships to students pursuing arts, drama, health and wellness, music, and vocational studies.

Scholarship Eligibility:

- Pursuing a related major or minor in the selected field of study listed above.
- Must attend a community college, college, university, or vocational school physically located in the state of Illinois during the Fall 2025 semester.
- Must be a graduating high school senior, current college/university/vocational student, and/or an adult returning to school.
- Must be a resident of the state of Illinois.

Submission:

Applications must be mailed in <u>one</u> sealed envelope, postmarked by APRIL 1, 2025. Materials that are late or incomplete will not be accepted.

Judy Rader Attn: GFWC Scholarship Committee 132 11th Street, Lincoln IL 62656

Disqualification:

- Failure to meet eligibility requirements
- Late or incomplete application
- Letters of recommendation from family or friends

Award Notification:

Applications will be reviewed by a scholarship committee. The minimum award is \$1,500. Scholarship winners will be notified by June 15th via email and postal mail. Winners will be posted on the GFWC Illinois Website.

If selected to receive a scholarship, the student will be required to show a letter of acceptance from the school the student will attend in the Fall, 2025 semester. Checks will be mailed and written directly to the college, university, or vocational school.

Questions:

Please email scholarshipifwc@gmail.com with questions.

Communication will only occur between the scholarship committee and the applicant.

GENERAL FEDERATION OF WOMEN'S CLUBS ILLINOIS

2025 Vina A Miller HEALTH & WELLNESS Scholarship Application (minimum \$1,500 award)

Applications must be mailed in one sealed envelope, postmarked by APRIL 1, 2025.

Student Name: Birth		
Permanent Mailing Address:		
Street	City	Zip
Email Address:	Phone:	
High School Graduation Date:	Cumulative High School GPA:/	
Anticipated Graduation Date (college, univ	ersity, vocational school):	
School you will attend in Fall Semester 202	25:	
School Mailing Address:		
Street	City	Zip
Major:	Minor:	
Application Items: the following MUST I 1. Resume with dates of participation. a. Extracurricular activities b. Volunteer activities c. Leadership positions		
	hat does service and volunteering mean to you? mitment to service? (250 word maximum)	
5. Two letters of recommendation from	CT/SAT scores if taken), college/university/vocational to m a teacher, coach, advisor, boss, or other professional so nily or friends will disqualify the applicant	
NOTE: Materials submitted with the app	plication will NOT be returned.	
I attest the application materials are my ow	n and I accept the terms of the scholarship application:	
Student Signature:	Date:	