



American Association of University Women  
AAUW Flagler County Branch  
P.O. Box 354873  
Palm Coast, FL 32135  
Email: [AAUWflagler1984@gmail.com](mailto:AAUWflagler1984@gmail.com)  
Website: [flaglercounty-fl.aauw.net](http://flaglercounty-fl.aauw.net)

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January 1, 2025

To: AAUW-Flagler Branch Continuing Scholarship Applicants  
From: Scholarship Committee  
Re: Scholarship Requirements

The American Association of University Women-Flagler Branch is pleased to offer scholarships to qualified continuing education students. To qualify for consideration for a scholarship an applicant must provide the following information to the American Association of University Women-Flagler Branch, Scholarship Committee, P.O. Box 354873, Palm Coast, FL 32135, by **March 15, 2025**:

- **A completed application form.**
- **Proof of citizenship and residency in Flagler County.** Applicants must be female, a U.S. citizen (may be naturalized), and a resident of Flagler County for at least one year. A copy of your voter registration will prove both; a driver's license proves residency only.
- Students must be enrolled in an accredited college or university with plans to work towards a degree or certification. To verify this:
  - Have an **official transcript or transcripts of credits received** indicating a **minimum of a B or 3.0 GPA** sent to the Scholarship Committee from each of the colleges or universities attended.
  - Provide **proof of acceptance by college/university** of choice unless currently enrolled at the college.
- Offer **two letters of reference**: one personal (not a relative); one professional (teachers, employer, church, or community leaders, etc.) mailed directly to the AAUW Scholarship Committee.
- **Resume** that includes post-secondary academic history, employment history, volunteer experience, and awards and honors.

Please read the requirements carefully. Incomplete applications will not be considered by the committee. Materials must be received by **March 15, 2025**. Financial need may be taken into consideration. Recipients are informed by letter and monies are sent directly to the college or university in which the candidate is enrolled or accepted, for use within the year in which the scholarship is awarded. If you have any questions, please contact: Ellie Bozzone, AAUW Flagler Scholarship Chair, at: [aauwflagler1984@gmail.com](mailto:aauwflagler1984@gmail.com).

**AMERICAN ASSOCIATION OF UNIVERSITY WOMEN  
FLAGLER COUNTY BRANCH  
SCHOLARSHIP PROGRAM  
CONTINUING EDUCATION STUDENT APPLICATION**

**Return the completed application to: AAUW-Flagler County Branch  
Scholarship Committee  
P.O. Box 354873  
Palm Coast, FL 32135**

**Application Deadline: March 15, 2025**

Student:

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Last First Middle Initial

Home Address:

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Street City State Zip Code

Telephone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_

Name of College/University:

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Has your college/university attendance ever been interrupted? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, dates of interruption(s):

\_\_\_\_\_ to \_\_\_\_\_ and \_\_\_\_\_ to \_\_\_\_\_  
Month/Year    Month/Year    Month/Year    Month/Year

Reason for interrupted study:

Have you ever been suspended or expelled from college/university? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes, please explain.

Are you eligible to return? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a first-time non-traditional college/university student (break of one year or more after  
High School) Yes \_\_\_\_\_ No \_\_\_\_\_

My major field of study is/will be:

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What degree or certificate are you planning to earn?

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**In the following section, please answer each question in paragraph form not to exceed 75 – 100 words.**

1. What are your short term and long term professional goals and aspirations?

2. How will your overall educational plans assist you in achieving your goals?

3. Describe any community or school leadership experience you have had that you feel has made a difference on your campus or in your community.

4. Define any special need for this scholarship.

5. Please share any additional information not already addressed in the application that you would like the scholarship committee to know.

All of the above information is true and correct, to the best of my knowledge.

Applicant

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Two letters of recommendation are required.**