

EXECUTIVE WOMEN INTERNATIONAL<sup>®</sup>

***Adult Students in  
Scholastic Transition  
(ASIST)  
Scholarship Program***

---

***Reaching out to Communities  
Through Education***

[WWW.EXECUTIVEWOMEN.ORG](http://WWW.EXECUTIVEWOMEN.ORG)

Please contact the EWI Corporate Office,  
801.355.2800 for instructions on submitting application.

*Revised January 2008*

EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM

EWI ASIST Scholarship Application Checklist

**Application Deadline – April 16, 2008**

Eligible Applications will be made by a resident of Washington or Benton County who has completed 30 credit hours prior to application and will include:

- \_\_\_\_\_ A copy of application for Federal Financial Aid (FAFSA)
- \_\_\_\_\_ A copy of any additional scholarship applicant has applied for
- \_\_\_\_\_ A copy of most recent federal or state tax return and W-2 Form
- \_\_\_\_\_ A copy of any government grants, loans, aid (housing subsidy, etc.)
- \_\_\_\_\_ A copy of application for unemployment benefits or other financial assistance
- \_\_\_\_\_ Two signed letters of recommendation
- \_\_\_\_\_ A 750-word essay defining life goals and objectives, how your educational goals will help attain these, and what qualifies applicant for this scholarship
- \_\_\_\_\_ A recent picture of applicant that can be reproduced if applicant is selected
- \_\_\_\_\_ ASIST application completed in its entirety

Only complete scholarship packets with all required information will be considered. Incomplete applications will be disqualified. All financial data provided will remain confidential.

**EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM**

The Adult Students in Scholastic Transition (ASIST) Scholarship is a non-discriminatory, educational scholarship program for the benefit of non-traditional students. Eligible applicants have attained 30 or more hours of college, university or technical school credit before making application and reside in Washington or Benton Counties of Arkansas.

The ASIST Scholarship Program helps provide financial support to adult students in a variety of transitional situations. The goal of the ASIST Program is to enable recipients to improve their self-esteem and to have a positive impact on the recipient's personal life, employment, family, and community.

In addition to the chapter ASIST awards, there are twelve Corporate awards of \$2,500.00 (payable in US dollars) given annually. Corporate candidates are selected from Chapter Winners.

Awards are provided for the recipients' education and related expenses to aid them in obtaining the necessary educational skills to help achieve career goals and objectives. Related expenses include tuition, books, and mandatory fees from their school (such as lab fees) and child care. **Not included are such things as rent, utility payments, travel expense, or repayment of student loans.** Checks for Chapter and Corporate scholarship awards are paid directly to the respective college, university, or technical school. Scholarship awards are valid for two years from the date granted. Unclaimed awards will be returned to the Chapter or Corporate B/C/DP accounts for redistribution.

Selection criteria includes, but is not limited to the following:

- Financial need
- Socially, physically, and economically challenged adults
- Adults responsible for small children

Applicants must meet the following eligibility requirements:

- Clearly define career goals and objectives
- Specify the educational requirements to attain the above goals and objectives
- Utilize re-entry programs available through college/universities, community agencies and service groups or career professionals
- 18 years of age or older
- Applicant must be United States citizen or permanent resident
- Applicant must be a resident of Northwest Arkansas
- Applicant must attend an institution of secondary education in Arkansas

EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM

**EWI ASIST Scholarship Application Instructions**

It is very important that this packet of materials be completed as thoroughly and as quickly as possible in order to meet the deadlines established by the Northwest Arkansas Chapter. Be concise, yet thorough, when answering all questions. Type your responses or print legibly in black ink. **All financial information provided will remain confidential.**

**Submission checklist:**

- Complete all required sections entirely and accurately. Incomplete applications will not be considered.
- Be sure to sign the application where indicated; Letters of recommendation must be signed.
- Include a copy of most recent federal or state tax return and W-2 Form.
- Include a recent picture of the applicant, suitable for reproduction, if selected.
- If applicable, include a copy of your application for:
  - Federal Student Aid (FAFSA)
  - Other Scholarships
  - Government Grants
  - Government Loans
  - Government Aid (Food Stamps, Rent/Housing Subsidy, etc.)
  - Unemployment benefits
  - Other Financial Assistance
- Use the enclosed personal Recommendation Form (form may be copied) to obtain **two (2) letters of recommendation** from individuals knowledgeable enough about you, both academically and personally, to provide insight into your personal characteristics, abilities, achievements, motivation, and potential. (Acceptable recommendations may come from an employer, teacher, school official, religious or personal acquaintance.) Read the Personal Recommendation Sections carefully to help you to understand the type of information required. When you make the request of your evaluator, be sure they feel comfortable completing the form about you.
- Obtain an official transcript of your grades from your educational institution or your ACT scores.

**Completed application should be returned, no later than April 16 to:**

Executive Women International  
Northwest Arkansas Chapter  
Penny Storms, ASIST Chair  
PO Box 848  
Fayetteville, AR 72702-0848  
[pstorms@ozarksecc.com](mailto:pstorms@ozarksecc.com)

**EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM**

**Application**

Date: \_\_\_\_\_ Birth date: \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Work/Cell Phone #: \_\_\_\_\_

\_\_\_\_\_ Marital Status: \_\_\_\_\_  
(Single / Divorced / Widowed / Married / Separated)

City/State/Zip: \_\_\_\_\_

**List Dependent(s) (If different from your tax return, please explain)**

<i>Name</i>	<i>Age</i>	<i>Relationship to Applicant</i>

**Work History**

<i>Employer</i>	<i>Description of Position</i>	<i>Employment Dates From / To</i>	<i>Hours per week</i>

**Education (list major if college graduate)**

<i>Name of School</i>	<i>Course of Study</i>	<i>Dates Attended</i>	<i>Graduated Yes / No</i>

**School Currently Attending**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_ Full or Part-time Student: \_\_\_\_\_

Total Credits Earned: \_\_\_\_\_ Remaining Credits Needed to Graduate: \_\_\_\_\_

Planned Graduation Date: \_\_\_\_\_ Major / Minor: \_\_\_\_\_

**NOTE: Please provide an Official Transcript of grades from the educational facility you are currently attending. If you are not currently enrolled in school, please provide your ACT scores.**

**SCHOLARSHIP PROGRAM**

**Application**

**INCOME / FINANCIAL DATA**

Please provide the following documents:

- Copy of any student aid application (if applying for)
- List with amounts of any grants or aid you receive
- Copy of your most recent tax return and W-2 Form

**MONTHLY INCOME**

Total Monthly HOUSEHOLD Income	\$
Total Monthly INDIVIDUAL Income	
Employment Salary	
Alimony / Allowance	
Child Support	
Government Assistance (food stamps, rent / housing subsidy, other)	
Veteran Benefits	
Unemployment / Social Security	
Interest Income / Dividends	
Student Loans, Scholarships, Grants	
Other	
<b>TOTAL INCOME</b>	<b>\$</b>

**MONTHLY EXPENSES**

Rent / Mortgage (specify)	\$	Current School Expenses	Per Semester
Telephone		Tuition	\$
Utilities (electric, gas, water, sewer, etc.)		Books	
Food		Transportation	
Clothing		Other	
Medical / Dental			
Credit Card Payments		<b>TOTAL SCHOOL EXPENSES</b>	<b>\$</b>
Insurance (life, home, medical, etc.)			
Child Support / Alimony		<b>Projected School Expenses</b>	<b>Per Semester</b>
Day Care or School		Tuition	
Car Payments		Books	
Car Insurance		Transportation	
Car Maintenance / Fuel (gasoline)		Other	
Other Household Expense (specify)			
		<b>TOTAL SCHOOL EXPENSE</b>	<b>\$</b>
<b>TOTAL MONTHLY EXPENSES</b>	<b>\$</b>		

Total educational funds requested for year 20\_\_\_\_ \$ \_\_\_\_\_

Are you the recipient of any other scholarships? If yes, list the names and amounts of scholarships:

---



---



---



---

EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM

**Application**

**ESSAY (attach additional pages as needed)**

Your essay must:

- 1.) Describe what your life's goals and objectives are and how obtaining additional education or a college degree will further these goals and objectives;
- 2.) Explain what qualifies you for this scholarship.

Please limit your essay to 750 words.

*By signing this application, I verify the above information to be true and correct and authorize the use and disclosure of such information to members, officers, employees, and agents of Executive Women International (EWI). In addition, I consent for all purposes to the sale, reproduction and/or use of photographs and voice recordings by EWI, including any agency, in all forms and media including television and advertising.*

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

**EXECUTIVE WOMEN INTERNATIONAL  
ADULT STUDENTS IN SCHOLASTIC TRANSITION  
(ASIST)  
SCHOLARSHIP PROGRAM**

**PERSONAL RECOMMENDATION FORM**

**INSTRUCTIONS:** *Two letters of reference must accompany this application. The reference letters should comment on the following points:*

- *State how well, how long and in what capacity the applicant is known*
- *Your knowledge of the applicant's personal situation*
- *Why you are recommending this individual for an ASIST award*
- *The applicant's goals/objectives and potential for success*

One letter of recommendation must be completed by an individual of the applicant's choice who is a past or present employer, teacher, guidance counselor, or school administrator.

A second letter of recommendation must be completed by an individual of the applicant's choice from a religious affiliation, volunteer organization or personal acquaintance.

Recommendation letters must be typed and limited to one page, one-sided and signed by the person submitting the recommendation.

The applicant named here is a candidate for the EWI ASIST Scholarship. Scholarships are disbursed directly to the student's account at his / her college / university/ technical school of choice.

The recommendation letters will become a part of the applicant's confidential file intended for use by the selection committee.

**Student Name:** \_\_\_\_\_

**Recommended by:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_

**Telephone Number (s):** \_\_\_\_\_

**Signature:** \_\_\_\_\_