

HEART OF THE OZARKS PBW \$500-\$1500 SCHOLARSHIP NON-TRADITIONAL APPLICATION

To: Female Scholarship Applicants

Thank you for your interest in pursuing a Heart of the Ozarks Professional and Business Women's scholarship. If you are in need of financial help in pursuing the training or schooling you need, please submit an application.

Please provide the necessary information and return your application and the first page of your most recent Federal tax filing postmarked by May 1, 2013 to Peggy Cochran, P. O. Box 890, Rocky Mount, Missouri 65072. Please feel free to black out your social security number. You should ask those who are filling out your recommendations to return them in a separate envelope by the same date.

We will announce scholarship winners during the month of May, 2013. I hope that you are one of the fortunate ones to receive an announcement letter certifying a scholarship grant. Scholarship money will be available for the first semester of the 2013-2014 year.

If you have any questions, please call or email Peggy Cochran at 573 392-2225 or cochranp@charter.com.

Sincerely,

Peggy T. Cochran
Chair of Scholarship Committee
Heart of the Ozarks PBW

PBW SCHOLARSHIP APPLICATION–NON-TRADITIONAL

APPLICANT'S NAME _____

E-MAIL ADDRESS _____

BIRTH DATE _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____

I authorize the release of school information necessary for application to the PBW Scholarship Program.

Signature _____

NAME AND ADDRESS OF COLLEGE(s) OR TRAINING BEING CONSIDERED:

APPROXIMATE COSTS OF TRAINING _____

LENGTH OF TRAINING OR SCHOOLING NEEDED _____

Applicant should attach (1) Typed statement on applicant's future goals, why she should be considered and financial need review, and (2) First page of applicant's most recent Federal tax filing. Mail all of the above to Peggy Cochran, P. O. Box 890, Rocky Mount, MO 65072 to be postmarked by May 1, 2013.

NOTE: Winners will be notified by May 30, 2013. Scholarship money will be available for the first semester of 2013-2014.

PBW SCHOLARSHIP RECOMMENDATION FORM

APPLICANT'S NAME _____

Please evaluate the above named applicant as to her qualities including Training potential, personal attributes, work ethic, general ability, and worthiness of a Professional and Business Women's scholarship. We thank you for your assistance in our selection process. Please sign, date and mail this form to Peggy Cochran, P.O. Box 890, Rocky Mount, MO 65072 to be postmarked by May 1, 2013.

Signature and Position _____
Date _____