



RUTH K. SOLOMON  
GIRLS CENTER  
SCHOLARSHIP APPLICATION



## RUTH K. SOLOMON GIRLS CENTER SCHOLARSHIP GUIDELINES AND APPLICATION

### SCHOLARSHIP GUIDELINES

#### A. PURPOSE

The Heartland Family Service Ruth K. Solomon Girls Center Scholarship is awarded to help young women pursue post-secondary education or training.

#### B. ELIGIBILITY REQUIREMENTS

In order to qualify for consideration, applicants must first meet the following eligibility criteria:

- „ Citizen of the United States
- „ Resident of Nebraska
- „ Graduate of Nebraska high school
- „ Active member of the Solomon Girls Center a minimum of one year prior to graduation from high school
- „ Enrolled in an accredited institution granting degrees or certification
- „ Applicants who are applying for the first and/or second time only

# SCHOLARSHIP GUIDELINES

## C. APPLICATION PROCESS

1. All applications must be completed and received by the date specified on the application (see guideline E).  
NOTE: Late submissions will not be accepted nor considered.
2. The applicant must request that her high school send transcripts and the most current grade report including a grade point average (GPA).
3. The applicant must submit three (3) letters of recommendation.  
NOTE: Letters from friends and family members will not be accepted.
4. The applicant is responsible for submitting all forms, letters and application at the same time.  
NOTE: Incomplete application packages will not be reviewed.
5. Heartland Family Service Ruth K. Solomon Girls Center reserves the right to request verification of any of the information provided in this application. All applications will be kept confidential.
6. Mail the completed application package, including the letters of recommendation to:

Scholarship Committee  
Heartland Family Service Ruth K. Solomon Girls Center  
6720 N. 30th Street  
Omaha, NE 68112

## D. SELECTION PROCESS

Applicants for the Ruth K. Solomon Girls Center Scholarship will be given consideration and priority based on the following criteria:

- „ High school seniors who are first-time applicants
- „ Applicants who have grade point averages (GPA) of 2.0 or better
- „ Financial need
- „ Information presented in the application
- „ Applicants selected to receive a scholarship will be required to provide a photo for publicity purposes.

## E. DEADLINE

Applications are due on \_\_\_\_\_.

# SOLOMON SCHOLARSHIP APPLICATION

## SECTION I: IDENTIFYING INFORMATION

Name: \_\_\_\_\_  
Last First Middle Initial

Home Address \_\_\_\_\_  
City/State Zip Code

Telephone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Years attended Solomon Girls Center: \_\_\_\_\_

High School: \_\_\_\_\_

Address \_\_\_\_\_

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

Planned/Date of Graduation: \_\_\_\_\_

I have applied to the following institutions:

1. \_\_\_\_\_  
Name of Accredited Institution Location

2. \_\_\_\_\_  
Name of Accredited Institution Location

3. \_\_\_\_\_  
Name of Accredited Institution Location

I have been accepted by and will attend the following institution:

\_\_\_\_\_

Name of Accredited Institution

Location

Cost per credit hour: \_\_\_\_\_

Hours required for full time status: \_\_\_\_\_

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## SECTION II: FINANCIAL INFORMATION, page 1

Applicant's Place of Employment \_\_\_\_\_  
Name of Business of Company

Address \_\_\_\_\_ City \_\_\_\_\_ Phone \_\_\_\_\_

How Long Employed?

Position/Job Title

\$ \_\_\_\_\_  
Annual Income

Applicant's Prior Employment:

1. \_\_\_\_\_  
Company Address

2. \_\_\_\_\_  
Company Address

Parental/Legal Guardian Information:

Name(s): \_\_\_\_\_

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

Combined Annual Income: \$ \_\_\_\_\_

# Dependents (include applicant) \_\_\_\_\_

# SOLOMON SCHOLARSHIP APPLICATION

## SECTION II: FINANCIAL INFORMATION, page 2

Other Applications for Financial Assistance?  Yes  No  
Please check the appropriate box and list below if applicable.

1. \_\_\_\_\_  
Type of Grant or Tuition Aid Amount Status
2. \_\_\_\_\_  
Type of Grant or Tuition Aid Amount Status
3. \_\_\_\_\_  
Type of Grant or Tuition Aid Amount Status

Estimated Amount of Financial Resources/Support:

From Savings ..... \$ \_\_\_\_\_  
From Earnings (employment) ..... \$ \_\_\_\_\_  
From Parents/Legal Guardian ..... \$ \_\_\_\_\_  
From Social Security/ADC/VA ..... \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

Estimated Expenses for the Academic Year:

Tuition ..... \$ \_\_\_\_\_  
Lab Fees, etc..... \$ \_\_\_\_\_  
Books..... \$ \_\_\_\_\_  
Transportation ..... \$ \_\_\_\_\_  
Housing ..... \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

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## SECTION III: PERSONAL ESSAY, page 1

Please answer the following questions. Attach additional pages if more space is needed.

Why is a post high school education important to you? \_\_\_\_\_

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What have you chosen as your particular area/field of study and why? \_\_\_\_\_

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What are your goals and ambitions after receiving your degree or certificate? \_\_\_\_\_

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List three of your strengths and explain how you developed those strengths.

1. \_\_\_\_\_

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2. \_\_\_\_\_

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3. \_\_\_\_\_

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# SOLOMON SCHOLARSHIP APPLICATION

## SECTION III: PERSONAL ESSAY, page 2

List two areas that you would like to develop and/or improve and why.

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List your involvement in extracurricular and/or community activities.

- |    |              |             |       |
|----|--------------|-------------|-------|
| 1. | _____        | _____       | _____ |
|    | Organization | Office Held | Year? |
| 2. | _____        | _____       | _____ |
|    | Organization | Office Held | Year? |
| 3. | _____        | _____       | _____ |
|    | Organization | Office Held | Year? |

Honors/Awards received:

- |    |                              |               |
|----|------------------------------|---------------|
| 1. | _____                        | _____         |
|    | Title or Name of Honor/Award | Date Received |
| 2. | _____                        | _____         |
|    | Title or Name of Honor/Award | Date Received |
| 3. | _____                        | _____         |
|    | Title or Name of Honor/Award | Date Received |

By my signature to this document, I certify that all of the information I've provided is factual.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date