



# Chapter BD

# Arkansas River Valley Scholarship

This scholarship is an award to assist young women in achieving their educational goals by recognizing their academic and leadership achievements.

2019-2020  
Application



## **P.E.O. Chapter BD Arkansas River Valley Scholarship Award A P.E.O. International Program, Funded by the P.E.O. International Foundation**

### **General Information**

The goal of the P.E.O. Chapter BD Arkansas River Valley Scholarship Award is to provide assistance to women to complete their educational goals by recognizing the academic and leadership activities.

### **The Award**

P.E.O. Chapter BD recommends award recipients receive **US\$1,000 annually**. Awards are funded by the P.E.O. International Foundation and paid directly to the recipient.

### **Who is Eligible?**

Women of all ages who are a resident of the Arkansas River Valley Area (Sebastian, Franklin, Crawford, Logan, or Scott Counties) are eligible to apply. Applicants must be enrolled fulltime in a specific and defined major, classified as a junior or senior status in college (or complete 60 college credit hours) and have a 2.5 cumulative GPA on a 4 point scale. Applicants will need to show financial need based on annual family income (according to current FASFA or the Free Application for Federal Student Aid) and demonstrate leadership and community service activities.

### **Application Process**

The application process must start with a member of P.E.O. Chapter BD Sisterhood. Please complete the attached Application Form and mail it to Cathy Williams, Selection Committee Chairperson, 3201 S. O Street, #5, Fort Smith, AR 72903 or email to Cathy William, catwill@cox.net.

Applicants must be recommended by the P.E.O. Chapter BD Scholarship Committee with final approval by P.E.O. Foundation Board of Trustees.

### **Application Deadlines**

**Fall Semester:** Completed application must be received by P.E.O. Chapter BD Scholarship Committee by July 1st.

**Spring Semester:** Completed application must be received by P.E.O. Chapter BD Scholarship Committee by November 1st.



**Application for  
P.E.O. Chapter BD Arkansas River Valley Scholarship Award**

Send 'typed' application and direct questions:

**P.E.O. Chapter BD Arkansas River Valley Scholarship Award  
c/o**

**Cathy Williams, Chairperson  
3201 S. O Street, #5  
Fort Smith, AR 72903  
Telephone: 479-420-4439  
E-mail Address: catwill@cox.net**

Name

\_\_\_\_\_

Last (Family)	First	Middle
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Present Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

County: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_  
(date/month/year) (city/country)

Name and Address of School/Institute currently attending:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Year of Study: \_\_\_\_\_ Number of College Hours Completed: \_\_\_\_\_

Current college GPA on a 4 point scale: \_\_\_\_\_

Declared major: \_\_\_\_\_

**PERSONAL GOALS**

Please describe your (1) course of study, (2) current career goals, and (3) why receiving this scholarship will help you achieve your goals.

**Please submit typed answers to the following questions:**

1. Please list all college/university activities including your leadership roles.
  
2. Please list all community activities including your leadership roles.
  
3. In a brief statement, please provide any other information that you would like the Scholarship Committee to know about you.
  
4. Evidence of Financial Need based on Annual Family Income (according to current FASFA or the Free Application for Federal Student Aid)

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

**Checklist to be completed by applicant:**

- Verification of current college enrollment by college/university official (including transcript)
- Three confidential recommendation letters with signatures from someone who can speak to your academic and/or leadership skills in or out of school (i.e., professor, employer, pastor)
- Verification of financial need statement by college/university official
- Completed typed application materials
- Verification of U.S. and County residency (copy of drivers license)

**DECLARATION BY APPLICANT**

I certify that all of the information contained in my application form is accurate to the best of my knowledge. I consent to the electronic or hard copy publication by P.E.O. Chapter BD or P.E.O. International Sisterhood of material in my application.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature



## Verification of Current Enrollment

### P.E.O. Chapter BD Arkansas River Valley Scholarship Award

I \_\_\_\_\_ authorize \_\_\_\_\_  
(print full name) (name of university or college)

to release information regarding my enrollment and grade point average.

\_\_\_\_\_ (date) \_\_\_\_\_ (signature of applicant)

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*Must be completed by College/University Official:*

I certify that \_\_\_\_\_ is currently enrolled as a  
(name)

\_\_\_\_\_ and has completed \_\_\_\_\_ college hours with a GPA  
(junior or senior) (total hours completed)

grade point average (GPA) of \_\_\_\_\_ at \_\_\_\_\_  
(4 point scale) (name of college/university currently attending)

\_\_\_\_\_ (address of college/university currently attending)

\_\_\_\_\_ Date \_\_\_\_\_ Signature and Title of College/University Official

\_\_\_\_\_ (Official College/University Stamp)



## Verification of Financial Need

### P.E.O. Chapter BD Arkansas River Valley Scholarship Award

I \_\_\_\_\_ authorize \_\_\_\_\_  
(print full name) (name of university or college)

to release information regarding my financial need status.

\_\_\_\_\_ (date) \_\_\_\_\_ (signature of applicant)

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*Must be completed by College/University Official:*

I certify that \_\_\_\_\_ is eligible to receive financial aid

based on current information provided to \_\_\_\_\_  
(name of college/university currently attending)

\_\_\_\_\_ (address of college/university)

Cost of Attendance at University \$ \_\_\_\_\_

Expected Contributions by Student or Family \$ \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Signature and Title of College/University Official

\_\_\_\_\_ (Official College/University Stamp)



## **P.E.O. Chapter BD Arkansas River Valley Scholarship**

### **Reference Letter Guidelines**

Please include in your **Reference Letter** all information you think is relevant to receiving this scholarship based on the following information and criteria:

#### **General Information**

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#### **Submission**

Please give your **Reference Letter** in a sealed envelope directly to the applicant.

Thank you for referring a woman in our area and for helping her achieve future success by empowering her with an education.

***P.E.O. Chapter BD Scholarship Committee***