



AMERICAN
ASSOCIATION OF
UNIVERSITY
WOMEN

**American Association of University Women (AAUW)
Las Vegas Branch Scholarship Application Form**

PLEASE PRINT

Name _____ Date of Birth _____

Local Mailing Address _____ Local Phone _____

Permanent/Home Mailing Address _____

Email Address _____ Cell Phone _____

Name of high school from which you graduated: _____

City where high school is located _____ Date of Graduation _____

Colleges or Universities Attended	Dates	Credits Received

Current Classification: Soph __ Jr __ Sr __ Grad __ Major _____ Degree Sought _____

Cumulative credits _____ Cumulative GPA _____

Please list the activities in which you currently participate (use back of sheet if needed).

Please list your work experience (use back if needed). _____

Please list your community service projects (use back if needed).

What qualifies you as a non-traditional student? _____

I attest that the above information is true and accurate .

Signature _____ Date _____

Attach copy of transcript and statement of educational and career goals, and the challenges of being a non-traditional female student. Mail to: AAUW Scholarship Committee, 2004 Eighth Street, Las Vegas, NM, 87701. **Must be postmarked no later than November 30.**