

# Green Bay Area P.E.O. Reciprocity Scholarship Application

**Scholarships up to \$7,000 – Available 2024-2025 School Year – Due April 01, 2024**

## **CRITERIA**

- a. Applicant must be female, a Brown County Resident, and a US/Canadian Citizen or legal resident.
- b. Applicant must have at least 24 consecutive months as a non-student sometime in her adult life.
- c. Applicant must be within 24 months of completing her educational goal.
- d. Applicant must NOT be enrolled in a doctoral degree program.
- e. Applicant must demonstrate financial need in a Student Aid Report (see Page 3).
- f. Applicant must attach a Personal Statement (see Page 4).

***This scholarship requires an annual application.***

***All applications will be evaluated based on information requested on the form.***

***Fill out this form completely so the committee can understand your situation.***

***Please type or print clearly.***

**Complete all pages of this form and send to the address listed on Page 4.**

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## **PERSONAL DATA**

**Name** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security # (last 4 digits)** \_\_\_\_\_

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

**City** \_\_\_\_\_, WI

**Zip** \_\_\_\_\_

**County** \_\_\_\_\_

**Marital Status** \_\_\_\_\_

**Number of Dependents at Home** \_\_\_\_\_

**Email address** \_\_\_\_\_

**\*\* Use a personal email address you check regularly.**

**Do not use a ".edu" email address as emails from PEO International will be blocked.**

**You will be notified of your status and/or acceptance via email. \*\***

**Affiliated with a P.E.O. Sister?** ☐ No ☐ Yes

**If yes, Member Name and Chapter** \_\_\_\_\_

(A recommendation letter from this person is highly recommended)

## **EDUCATIONAL INFORMATION**

### **PAST Educational Experience (oldest – most recent)**

	School Name and City/State	Dates Attended (month / year – month / year)	Type of Degree (masters, bachelors, etc)	Emphasis / Subject Area	Degree Completed? (yes / no)
High School / GED					
School 1					
School 2					

*(If you have more schooling, please attach on a separate piece of paper.)*

### **CURRENT Educational Experience**

Are you currently enrolled? ☐ No ☐ Yes

If yes, Institution Name and City/State \_\_\_\_\_

Anticipated School and Location for Fall 2024 \_\_\_\_\_

Anticipated Type of Degree \_\_\_\_\_

Anticipated Emphasis/Subject Area \_\_\_\_\_

Accepted for enrollment for Fall 2024? ☐ No ☐ Yes      Student ID# (if known) \_\_\_\_\_

Number of Credits Planned for Fall 2024 \_\_\_\_\_

Expected Graduation Date (month / year) \_\_\_\_\_

## WORK EXPERIENCE

Current/Most Recent \_\_\_\_\_

Hours (per day/week) \_\_\_\_\_

Past Two Years

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Anticipated employment and hours (per day/week) for 2024-2025 academic year

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## FINANCIAL INFORMATION REQUIREMENT

All applicants must complete and file the **Free Application For Student Aid (FAFSA)**.  
*If you need assistance completing the FAFSA, please contact your school's financial aid office.*

A **Student Aid Report (SAR)** will be generated from the Department of Education after you file.

**\*\* A copy of all pages of the SAR must be received with this application.**

***This is the document with multiple pages and 100+ small boxes.\*\****

**\*\* Scholarship funds cannot be used to pay past-due amounts.\*\***

## **ANTICIPATED EXPENSES FOR UPCOMING 2024-2025 ACADEMIC YEAR**

*Estimate if necessary. This section must be completed.*

	<u>Summer 2024</u>	<u>Fall 2024</u>	<u>Spring 2025</u>
Books/Fees/Equipment	\$	\$	\$
Tuition	\$	\$	\$
Other (graduation fees, etc)	\$	\$	\$
<b>Total Expenses per Semester</b>	\$	\$	\$
<b>Combined Total of All Semesters</b>	\$		

**Where would you prefer the monies be sent?**

☐ Directly to institution

☐ To myself

## **PERSONAL STATEMENT**

As an opportunity to present yourself to the scholarship committee, please attach a typed statement answering all of the following: This statement will be a major factor in the committee's decision process.

1. Your educational and career goals
2. Why your education was interrupted
3. Why you are applying for a scholarship (please include any financial difficulties that you have faced)
4. Any additional information that could help in the selection process

**\*\*We strongly encourage you to add letters of references from employers or school representatives (non-family members). However, your application will not be rejected if you do not provide these.**

### **Where did you find this application?**

☐ School    ☐ Social Media    ☐ PEO Member    ☐ Word of Mouth    ☐ Other: \_\_\_\_\_

**I affirm all the information in this application is correct to the best of my knowledge.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Your complete application, including Student Aid Report,  
*must* be postmarked by April 01, 2024.**

### **Send to Scholarship Chair:**

Stephanie Juckem  
3971 Agatha Christie Ave, De Pere, WI, 54115

### **Questions and completed applications can also be emailed to:**

gbarearecityscholarship@gmail.com

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We reserve the right to withdraw scholarship if disqualifying information  
is revealed following our initial decision.

Per P.E.O. International Policy, any scholarship awarded over \$4,000  
will be paid out over two equal installments (fall and spring semesters).

If applicant is graduating in school year for which the scholarship is awarded and graduates earlier than  
anticipated, failure to notify the Scholarship Chair prior to the first installment of scholarship being mailed  
out may result in the second installment being forfeited.

The **P.E.O. Sisterhood** is a philanthropic, educational organization that promotes education for women,  
including Cottey College, a four-year college for women in Nevada, MO,  
and loan and scholarship programs for undergraduate and graduate-level students.

Visit <http://www.peointernational.org/> to learn more.