



APPLICATION ACADEMIC | TRAINING | CERTIFICATION

Thank you for applying for a scholarship from Her Potential, Inc.

Please complete this application, **include a resume**, and return to Elsa Erickson at info@HerPotentialInc.org

PROCESS AND SELECTION

The maximum scholarship amount is \$1,500. If awarded, the scholarship will be paid directly to the vendor, i.e. school, store, consultant, etc. As you complete the application, please feel free to use additional pages if needed.

A representative from HER POTENTIAL will contact you to discuss your application. All applicants are asked to meet with a review committee via Zoom. Please indicate your first, second, and third choice for a meeting:

Weekday mornings

Weekday afternoons

Weekday evenings

CONTACT INFORMATION

Full Name:

Street Address:

City:

State:

ZIP Code:

Cell Phone:

E-Mail Address:

Current monthly income:

How did you hear about the Her Potential Scholarship Program?

PURPOSE OF SCHOLARSHIP

Amount of Request:

Please tell us how you plan to use the Scholarship Program funding if you are approved:

College Tuition

Books or other learning materials

Testing fees

Training Program

Other – Please explain

What are your employment or career goals?

How will financial assistance from HER POTENTIAL support your employment or career goals?

If you are already enrolled in a college program, please list courses you've taken and your current GPA.

SPECIAL SKILLS OR QUALIFICATIONS

What types of skills and/or training do you want to develop?

Summarize any special skills and qualifications you have acquired from employment, volunteer work, or through hobbies, sports, or other activities.

EMPLOYMENT HISTORY

Please summarize your employment history. **Please submit a resume.**

EDUCATION AND/OR TRAINING HISTORY

Please summarize your education history.

In what way would you consider giving back to your community if you are awarded a scholarship?
A few examples of ways to give back include: volunteering or pursuing a career with a non-profit, become a donor to a non-profit, offer a presentation to a group of women that may inspire them, etc.

SIGNATURE

Name (print):

Signature:

Date:

EQUAL OPPORTUNITY POLICY

HER POTENTIAL provides equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.