



## **Mary Lou McDowell Memorial Scholarship**

American Association of University Women

Harrisburg Branch

Mary Lou McDowell Memorial Scholarship

\$1,000 Scholarship

2017-2018 Academic Year

The **Mary Lou McDowell Memorial Scholarship** was established by the Harrisburg Branch of AAUW to pay tribute to Mary Lou McDowell. She was a member of our organization for nearly 50 years and served many terms on our board in various roles. Mrs. McDowell adored her children and grandchildren; promoted the importance of libraries, library services, and reading; loved the outdoors and environmental causes; and enjoyed frequent world travel, gourmet cooking, theater, art and music. Mary Lou's passion for learning and zest for life were evident in her commitment to community service, educational opportunities for youth, and lifelong learning for all.

Eligible candidates must meet the following criteria:

1. Enrolled as a full-time student in the fall 2017 term
2. Female student having completed at least 15 credits toward an undergraduate degree by the end of spring term 2017
3. Attend an accredited college or university located in Pennsylvania
4. Permanent resident of Dauphin or Cumberland County
5. Demonstrate academic achievement with at least a 3.25 GPA
6. Demonstrate financial need

Applicants must submit the following materials to the AAUW Harrisburg Scholarship Chair, P.O. Box 60911, Harrisburg, PA 17106-0911 by June 2, 2017:

1. Completed application
2. **Official** transcript through spring term 2017
3. Financial aid form
4. Verification of enrollment
5. Essay
6. 2 personal references (1 of which must be academic)

Additional information and application materials are available on the AAUW website:  
<http://harrisburg-pa.aauw.net>. The Harrisburg Branch of AAUW may be contacted by email at [HbgAAUWScholarship@gmail.com](mailto:HbgAAUWScholarship@gmail.com).

### **Deadline for Application Packet: June 2, 2017**

The AAUW Scholarship Committee may interview finalists as part of the selection process. Awardee will be honored at our branch luncheon in September 2017. The scholarship recipient may also receive Branch support to attend the National Conference for College Women Student Leaders (<http://www.nccwsl.org/>).

**Deadline for Submission: June 2, 2017**

Return to: Megan Fritsch & Marda Kunkle, AAUW Harrisburg, P.O. Box 60911, Harrisburg, PA 17106-0911

Email: [HbgAAUWScholarship@gmail.com](mailto:HbgAAUWScholarship@gmail.com)

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Rev. 01/2017



## Mary Lou McDowell Memorial Scholarship

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Include your name at the top of each page. Complete the application and essay. Obtain references. Request financial aid information. Be sure to include additional documentation and information as directed. Type or print neatly.

### Part I. APPLICATION

#### Contact and Residence Information

<b>Permanent Address:</b>	
Street City, State, Zip	
County:	
Phone:	
Email:	
<b>Current Address (if different from above):</b>	
Street City, State, Zip	
County:	
Phone:	
Email:	

#### High School and College(s) Attended

Name	City/State	Dates Attended	Grad. Date or Credits Completed

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Rev. 01/2017



## Mary Lou McDowell Memorial Scholarship

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Major Course of Study: \_\_\_\_\_

**Cumulative GPA as of last semester:**  
(Note: An **official** college transcript through spring term 2017 must be included with the application)

### Extracurricular Activities (include employment, if applicable)

Activity	Involvement	Approximate hours per month

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Rev. 01/2017



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Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Part II. ESSAY QUESTION

Please type or print neatly and limit your response to one page and 300 words maximum

**Essay Question:**

AAUW's mission is to advance equity for women and girls through advocacy, education, philanthropy and research. Mrs. McDowell fostered our mission through her many activities and adventures. How will your current educational, volunteer, and career goals contribute to the mission of AAUW?

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Rev. 01/2017



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Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Part III. References

Using the forms provided with this application, please submit two personal references. At least one of your references must be academic.

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Rev. 01/2017



## Mary Lou McDowell Memorial Scholarship

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### REFERENCE FORM #1

This student is applying for a \$1,000 scholarship from the AAUW Harrisburg Branch. Please complete this reference and return it to the student for inclusion in her application. Thank you for your cooperation.

1. How long and in what capacity have you known this student?

2. What three adjectives best describe this applicant and why?

3. Give a brief description of the student's academic, job related or extracurricular achievements you believe are indicative of future success.

Signature of Reference	
Name of Reference	
Relationship to Applicant	
Address	
Phone	
Email	

**Deadline for Submission: June 2, 2017**

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Rev. 01/2017



## Mary Lou McDowell Memorial Scholarship

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### REFERENCE FORM #2

This student is applying for a \$1,000 scholarship from the AAUW Harrisburg Branch. Please complete this reference and return it to the student for inclusion in her application. Thank you for your cooperation.

1. How long and in what capacity have you known this student?

2. What three adjectives best describe this applicant and why?

3. Give a brief description of the student's academic, job related or extracurricular achievements you believe are indicative of future success.

Signature of Reference	
Name of Reference	
Relationship to Applicant	
Address	
Phone	
Email	

**Deadline for Submission: June 2, 2017**

Return to: Megan Fritsch & Marda Kunkle, AAUW Harrisburg, P.O. Box 60911, Harrisburg, PA 17106-0911

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Rev. 01/2017



## **Mary Lou McDowell Memorial Scholarship**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **Part IV. DOCUMENTATION:**

**Consent to Release Educational Records**  
**Official Transcript**  
**Proof of Enrollment**  
**Financial Aid Information**

**Deadline for Submission: June 2, 2017**

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Rev. 01/2017



## Mary Lou McDowell Memorial Scholarship

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **CONSENT TO RELEASE EDUCATIONAL RECORDS TO A THIRD PARTY**

**\*\*\*NOTE: PRIVACY ACT ENFORCED\*\*\***

I, \_\_\_\_\_, hereby request and give my consent to the release of those educational records specified below to the American Association of University Women, Harrisburg Branch Scholarship Chairs, Megan Fritsch & Marda Kunkle, P.O. Box 90611, Harrisburg, PA 17106-0911.

It is further understood that the high school, college, or university will inform the above named applicant that any and all information contained in those educational records may not be transferred to another third party without her written consent.

Materials to be released:

1. **Official Transcript**
2. Mary Lou McDowell Memorial Scholarship Financial Aid Form
3. Verification of Enrollment

Reason for this release:

Application for American Association of University Women, Harrisburg Branch, Mary Lou McDowell Memorial Scholarship

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Student Signature

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Student ID Number

**Deadline for Submission: June 2, 2017**

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Rev. 01/2017

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

## FINANCIAL AID FORM

To be completed by the Financial Aid Officer at the Institution the applicant plans to attend during the 2017-2018 academic year.

Student Name:	
Student ID#:	
Permanent Address:	
School/College Name:	

Will this student be enrolled full time for fall term 2017?  Yes  No

Grade Classification for fall term 2017:  Freshman  Sophomore  Junior  Senior

Student Status:  Dependent  Independent

Has this student filed a FAFSA for the 2017-2018 academic year?  Yes  No

Annual Costs for 2017-2018 Academic Year	
Tuition	
Required Fees	
Room and Board	
Books and Supplies	
Other Expenses (explain)	
<b>Total Cost of Attendance</b>	

2017-2018 Expected Family Contribution	
Student	
Parent(s)	
<b>Total</b>	

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Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name:	_____
Student ID#:	_____

Financial Aid: Actual or Estimated

2017-2018 Financial Aid	
<b>A. Gift Aid</b>	
College Grants (need based)	_____
PELL	_____
PHEAA	_____
FSEOG	_____
Private Scholarships	_____
Institutional Scholarships	_____
<b>B. Self-Help</b>	
Federal Direct Loan	_____
Perkins	_____
Federal Work Study	_____
<b>C. Other Aid (please identify each)</b>	
_____	_____
_____	_____
_____	_____
_____	_____
<b>Total</b>	_____

This certifies that the information provided reflects data currently on file at this institution and is correct as of this date. It is understood that grants and loans for 2017-2018 may not be firm. This estimate or actual profile of assistance will provide AAUW Scholarship Selection Committee with information to determine the student's financial need.

Name of Financial Aid Officer:	_____
Phone Number:	_____
Email Address:	_____

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

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