

# **Designing Women Foundation Scholarship Program**

## **2010 Brenda Barker Memorial Cosmetology Scholarship**

The Claudia Bloodworth Scholarship Program is designed to promote educational opportunities for women who are residents of Southeast Missouri. The scholarships are need-based and are designed to encourage and challenge women to assume leadership roles and professional positions in a variety of careers.

A \$2000 scholarship will be given in honor of the late Brenda Barker by her family. Awardees may use the scholarship funds to cover cosmetology (and nail tech class) program tuition, fees and books at PBTCC or Black River Beauty College.

Eligibility Requirements:

- Must be female
- Must enroll as a full-time student in cosmetology program
- Must have high-school diploma or GED.

### **Deadlines**

*Applications Due:* June 30<sup>h</sup>, 2010

Top Three Finalists' Interviews: July, 2010

*Scholarship Recipient Announced:* July, 2010

*Award Made:* August 2010 (after program enrollment is sent to the Claudia Foundation)

For more information, contact:  
Designing Women Foundation  
staceymillion@hotmail.com  
573-429-8638

# Designing Women Foundation Scholarship Program

## 2010 Brenda Barker Cosmetology Scholarship APPLICATION

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### BASIC INFORMATION

Name \_\_\_\_\_

(First)                      (Middle)                      (Last)                      (Maiden)

Address \_\_\_\_\_

Phone (home & cell) \_\_\_\_\_

Date of birth: \_\_\_\_\_

Marital status: Single \_\_\_\_ Married \_\_\_\_ Widowed \_\_\_\_ Divorced \_\_\_\_ Separated \_\_\_\_

Children? Yes \_\_\_\_ No \_\_\_\_

If yes, list names and ages:

\_\_\_\_\_

\_\_\_\_\_

If married, list spouse's name, occupation and place of employment: \_\_\_\_\_

\_\_\_\_\_

Are you either a high school graduate or GED certified? Yes \_\_\_\_ No \_\_\_\_

Are you currently enrolled at a college or higher learning center? Yes \_\_\_\_ No \_\_\_\_

If yes, complete the following:

Field of study \_\_\_\_\_ GPA \_\_\_\_\_

Full time \_\_\_\_ or Part time \_\_\_\_

Numbers of credits required for degree \_\_\_\_

How many hours needed to complete degree? \_\_\_\_

Anticipated graduation date \_\_\_\_\_

Do you have previous college experience? Yes \_\_\_\_ No \_\_\_\_

If yes, attach appropriate transcripts with your application.

Are you currently employed? Yes \_\_\_\_ No \_\_\_\_

If yes, full time \_\_\_\_ or Part time \_\_\_\_

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Name & address of employer \_\_\_\_\_

Is your employer providing educational funding for you? Yes \_\_\_ No \_\_\_  
If yes, how much? \_\_\_\_\_

Please give a brief work history covering the past five years. (If necessary, attach a separate sheet).

Name of Co.	Location	Position	From	To	Reason for Leaving

\*\*\*\*\*

### FINANCIAL INFORMATION

- Please enclose a copy of the first page of your IRS 1040 tax forms from the past two years.

What is your anticipated gross income for 2010?

\_\_\_\_\_

If less than 2009 reported income, please explain \_\_\_\_\_

\_\_\_\_\_

If applicable, how much income does your spouse anticipate earning in 2010?

\_\_\_\_\_

Have you applied for a federal Pell grant? Yes \_\_\_ No \_\_\_

Amount of yearly assistance received from Pell grant: \_\_\_\_\_

Do you receive income or financial aid from other sources (i.e. social security, veterans benefits, child support)? Yes \_\_\_ No \_\_\_

If yes, please list and include dollar amounts \_\_\_\_\_

Do you have any dependents other than spouse and children living in your household? Yes \_\_\_ No \_\_\_

If yes, please list ages and relationship to you \_\_\_\_\_

\_\_\_\_\_

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**ESSAY SECTION**

Please note -- your typed or computer-generated response should be on a separate sheet of paper and no longer than one page.

*Why do you want to be a cosmetologist?  
What are your career goals and  
how will this scholarship help you achieve them?*

**Scholarship Recipient Statement**

I agree to have your name and picture used in publicity for the scholarship program and will be available to speak with media representatives, if necessary. Also, I agree to keep the Claudia Foundation informed of my educational accomplishments and my future employment.

I, \_\_\_\_\_, hereby acknowledge that all of the information included in the application is true and complete to the best of my knowledge. If additional information or documentation is requested of me, I will be pleased to furnish it.

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

\*\*\*\*\*

**ALL APPLICATIONS WILL BE HELD CONFIDENTIAL UNTIL COMPLETION OF THIS APPLICATION. PLEASE MAIL APPLICATION ALONG WITH ESSAY, ANY COLLEGE TRANSCRIPTS & TAX FORMS TO:**

Attn: Brenda Barker Memorial Scholarship  
Designing Women Foundation  
626 Cynthia St.  
Poplar Bluff, MO 63901

ALL APPLICATIONS MUST BE POSTMARKED BY June 15, 2010.  
INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED.  
RECEIPT OF INDIVIDUAL APPLICATIONS WILL NOT BE ACKNOWLEDGED.

**Application Checklist**

1. Make sure you fit within the eligibility requirements.
2. Complete application questions.
3. Complete e
4. Essay section
5. Sign statement section.
6. Attach copy of your 2009 -- 1040 tax forms.
7. Attach any college transcript copies.
8. Mail to:  
Brenda Barker Memorial Scholarship  
626 Cynthia St., Poplar Bluff, MO 63901