



Business and Professional Women's Club of Maui

P.O. Box 723
Puunene, HI 96784
(808) 877-8963

SCHOLARSHIP APPLICATION FORM

Date _____ Phone _____ Birthdate _____

Name in Full _____

Home Address _____

Mailing Address _____

Father's Full Name _____

Mother's Full Name _____

Please furnish three written references pertaining to character, health, and mental fitness.

Please list below their name, address and telephone number.

1. _____

2. _____

3. _____

School you wish to attend _____

Work you have done in the way of self-support _____

Recommended by _____

Submit this completed application together with your transcript and a written letter/resume including a narrative summary of why you should receive this scholarship from the Maui Business & Professional Women's Club. Include goals, objectives, interests, and any other items to strengthen your summary.

Return to:

Business & Professional Women/Maui
Scholarship Chair
P.O. Box 723
Puunene, HI 96784