



# FEMME 4 STEM SCHOLARSHIP

## FEMME 4 STEM SCHOLARSHIP APPLICANT INFORMATION

(Please print carefully in capital letters, Do not leave any lines blank if there is no information to provide, "N/A" should be used.)

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

Make sure your name is properly spelled the way you want it to appear in all public distribution

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

High School you are attending in 2018-2019: \_\_\_\_\_

Career Direction: \_\_\_\_\_

What studies/certifications/degrees do you need to become capable, competent and trained?

Anticipated Graduation Date: \_\_\_\_\_ Cumulative Student GPA: \_\_\_\_\_ Senior Year GPA: \_\_\_\_\_

Student Email: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

### ACCEPTANCE OF SCHOLARSHIP TERMS

I agree to adhere to all scholarship terms and guidelines as set forth by GiveTeens20 in the 2018-2019 scholarship criterion which includes the requirement that I remain a student during the entire academic year.

\$5,000 Scholarship will be dispersed in the amount of \$1,250 per year for 4 years as long as the recipient remains in a STEM field of study.

I further agree to repay any scholarship funds as requested by GiveTeens20 on behalf of the scholarship fund donor in the event that I am unable to fulfill my academic commitment for any reason and to notify GT20 in writing.

I further agree to have my name and personal achievements publicized in recognition of receiving a prestigious scholarship and to represent GT20 at events and/or other appearance requests.

\_\_\_\_\_  
Scholarship Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian signature if under age 18

\_\_\_\_\_  
Date

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FIND WHAT LIGHTS YOU UP

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