**Soroptimist International of North & West Vancouver**

**EmpowHER Dreams Award**

*Soroptimist International of North & West Vancouver is offering a new award called* ***EmpowHER Dreams Award*** *to help single women living on their own (conditions apply), to pursue a post secondary education at a community college, university, or equivalent educational institution. The applicants must have a demonstrated financial need, scholastic potential, and evidence to pursue post secondary education.*

*This is an educational cash award recipients may use to offset costs associated with their efforts to attain an education, including books, tuition, transportation, etc.*

*The EmpowHER Dreams Award is intended for single women who, for whatever reason, find that are in need of a high school diploma, or are new to Canada and must improve their English education to enter the workforce. It also focuses on women who find themselves lacking in the qualifications required to find a better career, and want to enter a skills-training program.*

*The* ***EmpowHER Dreams Award*** *is a* ***one-time cash award of $1,500*** *that may be used to help the recipient attain an educational goal.* ***Applications will be accepted between February 1 and March 31 of each year*** *and the successful recipient will be notified by the end of April.*

*The award will be presented at a recognition event honouring award recipients of all of Soroptimist International of North & West Vancouver’s awards programs in April of each year.*

***Please fill out the following application and submit it by March 31 to the following:***

***Soroptimist International of North & West Vancouver***

***Name: Awards Chair***

***Email: soroptimist@shaw.ca***

***Award application deadline: March 31 of each year***

***Amount of award: $1,500.00***

**READY TO APPLY?**

**Begin your application on the next page now!   
We wish you the best of luck in achieving your educational and professional goals.**

**Soroptimist International of North & West Vancouver**

**EmpowHER Dreams Award**

**APPLICATION**

**STEP 1: DETERMINE IF YOU ARE ELIGIBLE**

Eligible applicants must be women who:

* Provide the primary financial support for yourself alone i.e. you have no dependents, and you do not live with anyone who is providing financial support
* Demonstrate financial need
* Are enrolled in or have been accepted/ registered to a vocational/skills training program or an undergraduate degree program
* Are motivated to achieve your education and career goals.
* Have not previously been the recipient of a Soroptimist award, are not a Soroptimist member, or immediate family of either
* Note that preference is given to women who reside on the Northshore, the Sunshine Coast and he Sea-to-Sky corridor including Squamish.

**STEP 2: COMPLETE THE APPLICATION**

Fill out the EmpowHER Dreams Award application telling us about yourself. Your information will be kept confidential and shared only with the evaluators unless you give us written permission to use your story to publicize the program.

Enter your information in this form, and remember to save it with your name in the file name.

**STEP 3: OBTAIN REFERENCES**

You will need two different people (who are not related to you) to fill out the reference form, which you received along with this application. Please email this form to your references and request that they email the forms back to you when completed. Only two references will be accepted. Please use the form and do not submit reference letters.

**STEP 4: SUBMIT YOUR APPLICATION**

Attach your completed application and two reference forms to an email and send them to [soroptimist@shaw.ca](mailto:soroptimist@shaw.ca) by March 31. Incomplete applications or applications received without reference forms will not be considered.

**APPLICATION**

**EmpowHER Dreams Award**

**Part I: PERSONAL DATA**

**Name (Last, First, Middle)** Click or tap here to enter text.

**Street Address** Click or tap here to enter text.

**City** Click or tap here to enter text. **Province** Click or tap here to enter text.

**Postal Code** Click or tap here to enter text.

**Email Address** Click or tap here to enter text.

**Phone #** Click or tap here to enter text. **Best time to call** Click or tap here to enter text.

**Marital Status** Click or tap here to enter text.

**Highest level of education achieved** Click or tap here to enter text.

**Do you have dependents? Yes  No**

Are you the primary financial provider in your household? **Yes  No**

Does anyone else living with you contribute to the household financially? **Yes  No**

If yes, do they financially contribute more, less, or the same amount as you? **More  Less  Same**

What is their relation to you? Click or tap here to enter text.

**Part II: CAREER GOALS**

1. Please list the school you are currently attending, or to which you have been accepted, and your proposed program of study. (example: Early Childcare Education diploma program; Vancouver Community College, UBC four-year bachelor of science degree program in nursing etc.)

Click or tap here to enter text.

1. When will you complete your program of study (month and year)

Click or tap to enter a date.

1. Are you working while you are getting your education? Yes  No

If so, how many hours per week do you work?Click or tap here to enter text.

Please describe (in 300 words or less) your career goals and how your education and/or skills training support those goals in the space provided below. A separate attachment is acceptable.

Click or tap here to enter text.

**Part III: PERSONAL STATEMENT**

The **EmpowHER Dreams Award** aids women who have faced economic and personal hardships, and are seeking to gain additional skills, training and education. The program helps women to enter or return to the work force, or to improve their employment status. In the space provided below, please tell us in 750 words or less how these statements apply to you, and why you would make a deserving EmpowHER Dreams Award recipient.

Click or tap here to enter text.

*Personal statement continued ….*

Click or tap here to enter text.

**Part IV: FINANCIAL INFORMATION**

The Soroptimist **EmpowHER Dreams Award** recipients are chosen in part based on financial need. Please share information about your annual income and expenses. Please be as accurate as you can.

1. Total **annual** household income from all sources

Employment $ Click or tap here to enter text.

Government Assistance $ Click or tap here to enter text.

Savings $ Click or tap here to enter text.

Child Support $ Click or tap here to enter text.

Loans $ Click or tap here to enter text.

Scholarships $ Click or tap here to enter text.

Other $ Click or tap here to enter text.

Please list any additional **annual** income, including income other household members receive

Source Click or tap here to enter text. $ Click or tap here to enter text.

Source Click or tap here to enter text. $ Click or tap here to enter text.

Source Click or tap here to enter text. $ Click or tap here to enter text.

1. Please list your **annual** educational expenses only –
2. Tuition/School fees $ Click or tap here to enter text.
3. Books $ Click or tap here to enter text.
4. Other (please describe) $ Click or tap here to enter text.
5. Please List your **annual** living expenses below –

Housing $ Click or tap here to enter text.

Utilities $ Click or tap here to enter text.

Food $ Click or tap here to enter text.

Medical $ Click or tap here to enter text.

Childcare $ Click or tap here to enter text.

Transportation $ Click or tap here to enter text.

D. Other (please list additional expenses and assign an **annual** dollar value to each in the spaces below)

Click or tap here to enter text. $ Click or tap here to enter text.

Click or tap here to enter text. $ Click or tap here to enter text.

Click or tap here to enter text. $ Click or tap here to enter text.

Click or tap here to enter text. $ Click or tap here to enter text.

**TOTAL EXPENSES ANNUALLY** $ Click or tap here to enter text.

**Part V: REFERENCES**

Using the attached reference forms, please submit two references (from persons not related to you) with your completed application. Applications received without two references will not be considered.

**PART VI: PERSONAL AGREEMENT**

* I certify that all information provided in this application is complete and accurate to the best of my knowledge. I will notify Soroptimist International of North & West Vancouver if there are any changes.
* I certify that this is the only application I have made this year for a Soroptimist **EmpowHER Dreams Award**
* I understand that my application, upon submission, becomes the property of Soroptimist International of North & West Vancouver. The application will be considered confidential, unless the applicant grants Soroptimist permission to release personal information for the purpose of publicizing the Soroptimist **EmpowHER Dreams Award** program. By typing your name below, you adhere to the above requirements.

Click or tap here to enter text. Click or tap here to enter text.

**Printed name & signature of applicant Date**