# Eichler/Fox Award Application – Deadline is March 15th

Name,First	MI	Last	Telep	hone		
Permanent Address: Street		City		StateZip		
High School Name:		Graduation I	DateG	GED Date (if applicable)		
Email						
ADDITIONAL EDUCATION OR TRAINI	NG					
School Name:		Graduation Date or Credi	t Hours:	Major:		
School Name:		Graduation Date or Credi	t Hours:	Major:		
CURRENT EDUCATIONAL GOAL DAT	A (If you are	currently enrolled, please at	tach a transcript)			
School Name:		_Address:				
Anticipated area of study:		leading to a degree in	Fι	Ill or Part Time		
No. of credits requiredNo. con	npleted:	Anticipated complet	ion date:	GPA	A:	
WORK EXPERIENCE DATA (List most	recent first)					
Company:		Hours/Week	Dates Worked	Salary _		
Duties:						
Company:		Hours/Week	Dates Worked	Salary		
Duties:						
Company:		Hours/Week	Dates Worked	Salar	у	
Duties:						
ACTIVITIES/COMMUNITY VOLUNTEE	R SERVICE (	List all activities that relate	e to your goal)			
Activity:			L	ength of time invol	ved	
Activity:			L	ength of time invol	ved	
Activity:			L	ength of time invol	ved	
FINANCIAL DATA; Household Income: Gross such as the number of dependents in you			f statement to justify y	our financial need	for this awa	
OTHER AWARDS;			A manual t	Created	Deredia	
Name:			Amount	Granted	Pendir	

#### **Eichler/Fox Award Application (continued)**

- Have 2 individuals (e.g., professors, supervisors, non-relatives) who can comment on your character and abilities complete the forms entitled "Eichler/Fox Award Recommendation Form"
- They should complete the form, sign it, place it in an envelope and sign the outside of the envelope over the seal. At least one should be an academic reference. Your application will not be considered if your recommendations do not meet these guidelines.
- Include a copy of your most recent college transcript.
- A 500 word essay which explains your overall career goal, why you are pursuing it, and why you believe you are especially qualified for this. Please include why you think you will be successful in your major and your chosen career.
- Do not send any additional attachments. They will not be considered in the selection process.

# **CHECKLIST AND SIGNATURE**

# IN ORDER TO BE CONSIDERED, COMPLETED APPLICATIONS MUST INCLUDE THE FOLLOWING:

#### Check off to make sure you have included:

\_\_\_\_ Fully completed application form signed by you.

Copy of most recent transcript.

Two recommendation forms. \*\* Reminder - They must be in a sealed envelope with the recommender's signature across the seal. Failure to do so will disgualify your application.

The 500 word essay explaining your overall career goals.

#### YOUR APPLICATION MUST BE POSTMARKED NO LATER THAN THE MARCH 15th DEADLINE. You will be ineligible if incomplete information is submitted.

AFFIRMATION: In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any award. All information submitted becomes the property of the Zonta Club of Utica. Once the award winners are selected all applications and their attachments are destroyed to maintain the confidentiality of the applicants. If I am selected, I understand that a check for the amount of the award will be given upon proof of enrollment for the next semester.

Applicant Signature \_\_\_\_\_Date: \_\_\_\_\_Date: \_\_\_\_\_

How did you hear about our award?

Application Form Revised 2/22

### **Eichler/Fox Award Recommendation Form**

Appraiser: You have been asked to provide information in support of the applicant's request for the **<u>Eichler/Fox Award.</u>** Please give immediate and serious attention to the following so that the applicant can meet the deadline noted below.

•	Once you have completed the recommendation	tion form,	please	place it i	in an enve	elope, sig	n the outsid	e of the	<u>envelope</u>
	over the seal, and return it to the applicant.	Application	ns will n	ot be con	sidered if	your reco	mmendations	do not r	neet these
	guidelines.								

Thank you.							
Applicant's Name		How long have you known applicant?					
Dedication to studies:	Excellent	Very Good	Average	Needs Work			
Ability to set attainable goals							
Ability to seek, find, and use resources		<u> </u>					
Demonstration of initiative							
Verbal and written skills							
Good follow-through and task completion skills							
Ability to solve problems							
Interpersonal skills							
Comments							

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-	
-	
Appraiser's Name	Title
Business/Organization Name	
Appraiser's Signature:	Date

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AWARD APPLICATION DEADLINE: MARCH 15th

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Interpersonal skills							
Comments							

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Appraiser's Name	_Title
Business/Organization Name	
Appraiser's Signature:	Date

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