National Association of University Women, Inc.
Lake Charles Branch

P.O. Box 3313 | Lake Charles, LA 70602-3313 | lakecharlesnauw@yahoo.com

2025-2026 Scholarship Application

National Association of University Women

The National Association of University Women is an organization whose primary focus is on women, youth, and the disadvantaged in our communities and in developing countries by addressing educational issues, advancing the status of women's issues, and strategically partnering with allied organizations. Information about the National Association of University may be found at www.nauw1910.org.

SCHOLARSHIP AWARDS

Every year, the Lake Charles Branch awards a $1,500 scholarship to **two African American female** high school graduates.

ELIGIBILITY REQUIREMENTS

To be considered for a NAUW scholarship, the applicant must:

- Be a graduating senior female – May 2026
- Must have a 2.5 GPA or better
- Enter a four-year university or college as a full-time freshman in the Fall of 2026
- Based on financial needs

APPLICATION PROCEDURE

To be considered for a scholarship, a completed application must be sent by the applicant to the address listed below, postmarked **March 7, 2026.** Applications received after the postmarked date will not be considered. Your completed application must include the following:

1. Scholarship Application Form (**Signed, Dated, and a Recent Photo of Yourself**)
2. Please send a copy of your official high school transcript. The transcript should be mailed with the application. If additional space is needed, use 8 ½"x11" paper and attach the application from your school to the address below, or mail it in an envelope sealed by a school official with the **official's signature or the school's raised seal on the transcript**.
3. Copy of verification of ACT scores
4. Typed 150-word autobiography
5. You will need two letters of recommendation:
    - A letter of recommendation must be from the Parent/Guardian expressing financial need.
    - A letter of recommendation from the School Counselor, Teacher, Principal, Clergy, or Organizational Sponsor. If the letter is from Counselor, Teacher, Principal, Clergy, or Organizational Sponsor, then it must be on the **official letterhead** and include the length of time (2 or more years), the person completing the application has known you, in what capacity, and additional comments regarding intellectual ability, maturity, and motivation, interpersonal, verbal and writing skills. Please include contact information for your reference.

*Mail all completed applications with official transcripts, ACT scores, and recommendation letters by **March 7, 2026,** to the address below: All information is considered confidential.

NAUW – Lake Charles Branch
P. O. Box 3313
Lake Charles LA 70602-331

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2025-2026 Scholarship Application

I. Applicant Information

First Name	Middle Name	Last Name
Street Address		
City	State	Zip
Home Phone	Cell Phone	Date of Birth (Month/Day/Year)
E-mail Address		

High School

High School Attending		Grade	ACT Score	GPA
Address	City	State	Zip	

College/University and Major

Preferred College/University	Location (City and State)
Intended Major/Field of Study	Intended Minor/Field of Study

II. Parent/Guardian Information

Name of Mother/Guardian			
Mother/Guardian's Address (if different from applicant's)	City	State	Zip
Mother's Work Phone	Mother's Home/Cell Phone		
Mother's Occupation	Mother's Employer		
Has your mother or guardian ever been a member of the Lake Charles Branch of NAUW? Yes ☐ No ☐	If you answered yest o the previous question, provide the dates (years) of membership:		
Name of Father/Guardian			
Father/Guardian's Address (if different from applicant's)	City	State	Zip
Father's Work Phone	Father's Home/Cell Phone		
Father's Occupation	Father's Employer		

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III. Financial Need

Check the box below that best describes your family's combined gross income. Income should include employment, SSI, FIA, alimony, child support, disability, etc.

- ☐ $0 - $14,999
- ☐ $15,000 - $29,999
- ☐ $30,000 - $49,999
- ☐ $50,000 - $74,999
- ☐ $75,000 - $99,999
- ☐ $100,000 or more

Number of Dependent Children in Family	Number of Dependent Children Currently Attending a College/University

IV. Honors and Awards (e.g., academic, athletic, community, and/or school awards)

Award	Source of Award	Reason(s) for Award
1.		
2.		
3.		
4.		
5.		

V. Extra-Curricular/Community Service Activities (e.g., school, religious, social groups)

Name of Group/Activity	Grade (Check boxes that apply.)				Leadership Position(s) Held
	9	10	11	12	
1.	☐	☐	☐	☐	
2.	☐	☐	☐	☐	
3.	☐	☐	☐	☐	
4.	☐	☐	☐	☐	
5.	☐	☐	☐	☐	
6.	☐	☐	☐	☐	
7.	☐	☐	☐	☐	

VI. Colleges and Universities

Name of School to Which You Applied	City/State	Status of Application
1.		
2.		
3.		
4.		
5.		
6.		

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VII. Financial Awards and Scholarships

Scholarship, Loan, Grant, or Award Applied For	Source	Amount Awarded vs. Expected
1.		
2.		
3.		
4.		
5.		

VIII. Work/Volunteer Experience

Employer/Organization	Dates of Employment/Service	Position Held
1.		
2.		
3.		

IX. General Essay for all applicants - * Use a separate sheet.

Typed 150-word autobiography- highlighting your community service, leadership activities, and college and career goals.

Signature of Applicant: _____ Date:_____

Signature of Parent(s)/Legal Guardian(s). Signature

_____ Date: _____

Check one: ☐ Father ☐ Mother ☐ Guardian

_____ Date: _____

Check one: ☐ Father ☐ Mother ☐ Guardian

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Scholarship Application Checklist

Use this checklist to make sure that you have submitted all the required materials to receive consideration for the scholarship. Incomplete applications will not be considered.

Your application **must** include the following documents:

- □ A completed and signed application form. (signed by applicant and parent/guardian)
- □ An **official, signed** high school transcript (sealed envelope).
- □ Two (2) letters of recommendation.
    - A letter of recommendation must be from the Parent/Guardian expressing financial need.
    - A letter of recommendation from the School Counselor, Teacher, Principal, Clergy, or Organizational Sponsor. If the letter is from Counselor, Teacher, Principal, Clergy, or Organizational Sponsor, then it must be on the official letterhead and include the length of time (2 or more years), the person completing the application has known you, in what capacity, and additional comments regarding intellectual ability, maturity, and motivation, interpersonal, verbal and writing skills. Please include contact information for your reference.
- □ Verification of ACT scores
- □ Wallet-size photograph
- □ Typed 150-word autobiography
- □ Media Release Form signed by parent/guardian

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Scholarship

Media Release Form for Minors (if under 18)

The National Association of University Women-Lake Charles Branch has my permission to use my or my child's photograph publicly. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian's signature: _____Date_____

Parent/Guardian's Name: _____

Child's Name: _____

Phone Number: _____