



Deltona Woman's Club, Inc

1049 E. Normandy Blvd., Deltona, FL 32725

Mailing Address: P. O. Box 5215, Deltona, FL 32728

Ph# 386-574-2311

Email– deltonagfwc@gmail.com



The **Deltona Woman's Club through the Florence Walker Scholarship Program** is committed to providing opportunities for female students residing in Deltona pursuing further education after high school. We are **PROUD** to announce that we are taking applications for the 2025-2026 school year.

Since 2011, the Deltona Woman's Club has been awarding at least **2 female students residing in Deltona** scholarships during the High Schools Awards Program for Deltona, Pine Ridge, and University High Schools. Although grades are important in the final decision, participation in school and community work will be a factor among other information given.

Applications must be submitted BY April 6, 2026 via email to: nschleicher525@gmail.com OR mailed to, Nancy Schleicher, 1460 Baton Dr. 32725. Please read the application carefully, as incomplete applications will not be considered for scholarship. Certificates will be awarded during the High School ceremony and checks will be sent directly to your accepted College. We will need your student college ID number to attach to the check sent to the registrar.

Thank you,

Nancy Schleicher

Deltona Woman's Club

Scholarship Chair

Email: nschleicher525@gmail.com

Deltona Womans' Club

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Florence Walker Scholarship

This scholarship is awarded to a female student residing in Deltona and is attending one of our public schools. Although grades are important in the final decision, participation in school and community among other information will be a factor. Please fill out completely as incomplete applications will not be accepted.

Application

NAME _____ Home Ph# _____ Cell # _____

SSN# _____

Address _____ City- Deltona- _State- FL Zip: _____

Email _____ Family Size: ____ Living with Parents? _____ Father? ____

Mother? ____ Grand Parents? _____

List Siblings and ages: 1: _____ 2: _____

3: _____ 4: _____

OCCUPATION AND PLACE OF EMPLOYMENT OF FATHER/MOTHER OR LEGAL GUARDIAN

COMBINED INCOME (including Child support, Alimony, Social Security, etc.)

\$10,000 and under ____ \$10,001-20,000 ____ \$25,001-\$30,000 ____ \$30,001-\$35,000 ____

\$35,001-\$40,000 ____ \$40,001- \$50,000 ____ \$50,001 - \$60,00: ____ \$60,001 and over _____

ARE YOU EMPLOYED? _____ WHERE? _____ HOW LONG? _____

What is your GPA? _____ WHAT IS YOUR SAT SCORE? _____ WHAT IS YOUR CLASS RANKING?

Teacher's/Counselor's signature confirming your GPA,SAT and ranking

Print _____ Signature _____

WHAT IS YOUR CAREER OR PROFESSIONAL PLANS?

LIST any UNIVERSITY/ COLLEGE/ VOCATIONAL SCHOOL TO WHICH YOU HAVE SUBMITTED AN APPLICATION TO THE REGISTRAR:

HAVE YOU BEEN ACCEPTED? _____

ANNUAL PROJECTED TOTAL EXPENSES: _____

Attach a copy of your acceptance letter to this application.

HAVE YOU APPLIED FOR ANY OTHER GRANTS OR SCHOLARSHIPS? _____

HAVE YOU RECEIVED ANY? _____

IF SO, NAMES? _____ AMOUNT RECEIVED _____

IF SO, NAMES? _____ AMOUNT RECEIVED _____

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IF SO, NAMES? _____ AMOUNT RECEIVED _____

LIST ANY CLUBS/ COMMUNITY ORGANIZATIONS WITH WHICH YOU HAVE BEEN ASSOCIATED. _____

ATTACH WRITTEN REFERENCES FROM TWO (2) ADULTS, ONE OF WHOM MUST BE A TEACHER, WHO WILL VERIFY YOUR SERVICE TO SCHOOL AND COMMUNITY.

IN YOUR OWN WORDS, EXPLAIN WHY YOU ARE APPLYING FOR THIS SCHOLARSHIP.

Attach a statement)

