



WOMEN IN BUSINESS COMMITTEE

WIB offers educational grants to working women who want to secure training and/or education to improve their employment status, advance in their current employment to a different, more financially or personally rewarding position, or to own or manage their own business.

The following criteria must be met to qualify as a candidate:

- ❖ **Must be employed;**
- ❖ **Must be at least 18 years old;**
- ❖ **Have a high school diploma or equivalent;**
- ❖ **Show a history of achievement (community involvement); and**
- ❖ **Live in Zip Codes 20715, 20716, 20720, or 20721, or be a GBCC member, or an employee of a GBCC member.**
- ❖ **Candidates must complete an application and secure two references.**

Deadline: Friday, May 5, 2017 by 4:00 p.m.

Applications are now available and may be obtained by contacting the GBCC office at 301/262-0920 or 2614 Kenhill Drive, Suite 117, Bowie, MD 20715 or online at www.bowiechamber.org

**GREATER BOWIE CHAMBER OF COMMERCE
WOMEN IN BUSINESS EDUCATIONAL GRANT APPLICATION**

INSTRUCTIONS:

1. Please read page 4 of this application to determine if you meet the criteria set forth as the basis for this educational grant award.
2. Type or print (black ink) this application clearly. If additional space is needed, you may submit no more than two additional, double-spaced, one-sided pages.
3. Submit the completed application to the Greater Bowie Chamber of Commerce office at 2614 Kenhill Drive, Suite 117, Bowie, MD 20715 no later than 4:00 p.m. on Friday, May 5, 2017.

PART 1. PERSONAL DATE

Name: _____

Resident Address: _____

City/State/Zip: _____

Work Phone: _____ Home Phone: _____

Birth Date: _____ Marital Status: _____

Number of Dependents: _____ Ages: _____

Are you physically able to work and/or carry on a course of study? _____

Part 2. OCCUPATIONAL EXPERIENCE (Last 10 years, beginning with current)

Employer: _____ Dates: _____

City/State/Zip: _____ Salary: _____

Responsibilities: _____

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PART 3. EDUCATION

High School: _____ Location: _____
Graduation Date: _____

Highest Degree Held:
_____ Community College
_____ Undergraduate College
_____ Graduate School

Degree(s) held: _____

Institution Attended: _____ Location: _____

Date(s) Attended: _____ Field(s) of Study: _____

Have you ever received a scholarship, fellowship, grant or other award for education/training?

Source	Amount	School	Date

Note any educational achievements. Consider your grad point average, your course load, committees you worked on, etc., within the past five (5) years.

PART 4. VOLUNTEER/LIFE EXPERIENCE

Organization: _____ Date Served: _____

Activity: _____

Organization: _____ Date Served: _____

Activity: _____

PART 5. PERSONAL STATEMENT

What specific skills do you hope to achieve in your proposed field of study? To what occupation will your skills lead you? How will this award be used? What training/education will you seek?

Why do you feel you would make a good award recipient? Relate this statement to the award criteria on page 4 of this application. Mention any goals (both personal and business related) you have accomplished in spite of adverse conditions.

NOTE: If additional space is needed, you may submit two additional, double-spaced, one-sided pages.

PART 6. REFERENCES

Attached to this application are two reference forms to be completed by people who you know, but are not related to you. It is recommended one reference be either a former instructor or employer. Please give your references a stamped envelope addressed to: Greater Bowie Chamber of Commerce, 2614 Kenhill Drive, Suite 117, Bowie, MD 20715, and ask them to send in their response no later than Friday, May 5, 2017 at 4:00 p.m.

PART 7. AGREEMENT

- I certify that all the information provided in this application is complete and accurate to the best of my knowledge. I will notify the GBCC if there are any changes after the application is submitted.
- I understand that this award is not a scholarship and is therefore taxable as required by tax laws.
- I understand that this application is confidential, unless permission of the applicant is given to the GBCC to release personal information for the purpose of publicizing this awards program.

Signature of Applicant

Date

NOTE: Should you need help in answering a question, you may call the GBCC at 301/262-0920. Finalists may be formally interviewed.

How did you hear about this grant? _____

WOMEN IN BUSINESS AWARD PROGRAM CRITERIA

- 1. Candidate must be a woman at least 18 years old.**
- 2. Candidate must be currently employed and have a high school diploma or equivalent.**
- 3. Candidate must be a resident of zip codes 20715, 20716, 20720 or 20721, or be a GBCC member, or an employee of a GBCC member.**
- 4. Candidates must submit two personal references provided by a non-related person, and a fully executed application, which will be judged by the selection committee.**
- 5. The Educational Grant Award will enable the candidate to secure training and/or education to improve their employment status; allow them to advance from their current employment to a different, more financially or personally rewarding position; or own or manage their own business.**
- 6. Candidate must show a history of achievement/commitment, either in employment, community service, school or a combination.**

**GREATER BOWIE CHAMBER OF COMMERCE
WOMEN IN BUSINESS EDUCATIONAL GRANT AWARD PROGRAM**

PERSONAL REFERENCE FORM

Thank you for taking time to recommend _____
for consideration as a Women in Business Award Program candidate. Criteria for selection are printed on the reverse side of this form. When you have completed this form, please return it to the Greater Bowie Chamber of Commerce by mail to 2614 Kenhill Drive, Suite 117, Bowie, MD 20715 no later than 4:00 p.m. on Friday, May 5, 2017.

1. How long have you known the candidate and in what capacity?

2. What is your personal knowledge of the candidate's strengths and responsibilities in her life? Address specific examples of accomplishments at work, school, home, community, church, etc.

3. What is your knowledge of the candidate's educational goals and her progress toward accomplishing these goals? (Consider barriers to overcome)

4. Are there any additional recommendations you would like to mention that you think the judges should know about the candidate? (Please refer to the criteria)

Name: _____ Date: _____

Address: _____

Home Phone: _____ Work Phone: _____

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