

**EDUCATIONAL INSTITUTION IN WHICH ENROLLMENT IS DESIRED**

Institution's Name \_\_\_\_\_

Institution's COMPLETE Mailing Address \_\_\_\_\_

Course of Study \_\_\_\_\_

Degree Sought \_\_\_\_\_

Expected Date of Completion \_\_\_\_\_

Amount of Tuition/Fees per Semester \$ \_\_\_\_\_

Amount of Other Fees per Semester \$ \_\_\_\_\_

Date Payment **MUST** be made? \_\_\_\_\_

Have you been admitted? \_\_\_\_\_

Should I be selected as winner of the Ruth B. Sayre Scholarship, I grant the Country Women's Council USA the right to use, publish, and copyright (including audio, moving image, or photograph) for educational programs and publications, web sites, and promotion of Country Women's Council.

**Print name of Parent or Guardian**

Parent or Guardian must sign if subject is under age 18

Please Place Photo  
HERE  
Using Rubber Cement

SEND COMPLETED APPLICATION WITH ATTACHMENTS BY **MARCH 1<sup>ST</sup>**, TO ACWW/CWC State Society President/Chairman

Signature of Applicant \_\_\_\_\_

Date application completed \_\_\_\_\_

Sponsoring State ACWW/CWC Society \_\_\_\_\_

Signature of State ACWW/CWC Society President/Chairman

Date \_\_\_\_\_

Address \_\_\_\_\_

RUTH B. SAYRE Scholarship applications shall be POSTMARKED TO CWC VICE CHAIRMAN BY APRIL 1<sup>ST</sup>

**SCHOLARSHIP MONEY SHALL BE SENT TO THE EDUCATIONAL INSTITUTION ON OR ABOUT AUGUST 1st**

APPLICANTS SHALL BE NOTIFIED