

# EMU Women's Association Scholarships

## Fall 2025 - Winter 2026 Award

### Women's Association Merit Award for Outstanding Scholarship

Junior or senior, registered full-time, Fall 2025 and Winter 2026  
EMU G.P.A of 3.5 or higher

### Women's Association Endowed Scholarship

Junior or senior, registered full-time, Fall 2025 and Winter 2026  
EMU G.P.A. of 3.0 or higher

### Wives and Associates Endowed Scholarship

Sophomore, Junior or Senior, registered full-time or part-time, Fall 2025 and Winter 2026  
EMU G.P.A of 2.5 or higher

### Women's Association Graduate Scholarship

Graduate student admitted to a program, registered full-time or part-time, Fall 2025 and Winter 2026  
EMU G.P.A of 3.0 or higher

### Applications are judged on:

1. The quality and strength of the personal statement.
2. Two required references.
3. **Gender identification is not a consideration for the Women's Association Scholarships. These scholarships are open to all EMU students who qualify.**

Submit all application materials by **Friday March 21, 2025** to Amy Fyn,  
[afyn@emich.edu](mailto:afyn@emich.edu)

**\*\*ALL APPLICATION MATERIALS MUST BE SUBMITTED ELECTRONICALLY\*\***

### Announcement and Receipt of the Awards

- Applicants will be notified of the Scholarship Committee's decision after **May 5, 2025**.
- Federal regulations require that total aid be equally split between two semesters. The scholarship will be added to your Financial Aid account at the beginning of the Fall 2025 and Winter 2026 semesters.
- Recipients are invited to attend the Women's Association Fall Reception given in their honor. Invitations will be sent out in the Fall of 2025. Family and friends are invited.

Please include the following in your application:

### **\_\_\_\_\_ APPLICATION FORM AND REFERENCES**

1. Complete the Application Form.
2. Include the names and contact information for two references.
  - One from a faculty member within your major field or program.
  - One from another faculty or staff member.
  - Confirm that each reference is aware that they are listed as your reference for this application.
  - Reference letters not required.

### **\_\_\_\_\_ AUTHORIZATION FORMS**

1. Financial Aid Form will allow the committee to review your student financial information in the Financial Aid Office.
2. EMU GPA Verification Form will allow the committee to verify actual grade point average.

### **\_\_\_\_\_ PERSONAL STATEMENT (Limit 1000 words)**

Prepare a personal statement emphasizing:

1. Your achievements during your college career (home life, university, church, etc.).
2. Academic, vocational, and community service experiences during your college career. (Include extra-curricular activities and indicate how your activities have made a difference in your life or in the lives of others.)
3. Goals and future aspirations after completing your EMU degree.

## EMU Women's Association Scholarships Application

Name \_\_\_\_\_ Student Number E \_\_\_\_\_

Local Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Permanent Address (Where you can be reached May through August)

\_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

College Hours Completed \_\_\_\_ Cumulative EMU G.P.A. \_\_\_\_ Current Course Load \_\_\_\_

Rank: Freshman      Sophomore      Junior      Senior      Graduate Student

Degree(s) Sought \_\_\_\_\_

Major(s) \_\_\_\_\_

Minor(s) \_\_\_\_\_

Concentrations(s) \_\_\_\_\_

Are you a transfer student? \_\_\_\_\_ If yes, when did you transfer to EMU? \_\_\_\_\_

Other institutions attended: \_\_\_\_\_

### **REFERENCES**

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## **AUTHORIZATION FORMS**

### **Financial Aid Verification**

In order to process your application form, we need your permission to contact the Financial Aid Office and request verification of your financial need.

Please read the authorization statement and sign below, indicating that you agree to permit the Financial Aid Office to review your files and to share the information with the committee.

I hereby agree to allow the Financial Aid Office to review my files and to share the information with the EMU Women's Association Scholarship Committee.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Student Number \_\_\_\_\_

Date \_\_\_\_\_

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### **EMU GPA Verification**

In order to process your application form, we need your permission to contact the Records and Registration Office and verify your EMU GPA.

Please read the authorization statement and sign below, indicating that you agree to permit the Records and Registration Office to review your files and to share the information with the committee.

I hereby agree to allow the Records and Registration Office to permit the Records and Registration Office to review your files and to share the information with the Women's Association Scholarship Committee.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Student Number \_\_\_\_\_

Date \_\_\_\_\_