WHAT IS THE BEATRICE B. ETTINGER SCHOLARSHIP FUND?

The Beatrice B. Ettinger Scholarship Award was established in 1988 by the Council for Continuing Education For Women of Central Florida, Inc. The Award was established to honor one of its founding members, Mrs. Beatrice B. Ettinger, who has dedicated her life to the improvement of the quality of life for women. Thousands of women have been inspired and motivated by Bea, as she is respectfully known.

The Beatrice B. Ettinger Scholarship Fund was established at the Central Florida Foundation on December 31, 2013 with the purpose to assist women in Central Florida with continuing their education, either vocationally or professionally.

WHO IS ELIGIBLE TO RECEIVE THE BEATRICE B. ETTINGER SCHOLARSHIP FUND?

Women who meet the following criteria will be considered for this scholarship opportunity:

- Must be at least 30 years of age at the time of application
- Full time resident of Central Florida for at least the previous 12 months
- Documented financial need
- An attainable career goal and/or ability to improve earning capacity/skills

AWARD AMOUNT AND RULES

- Up to $2,500 may be awarded annually to successful applicants.
- Must submit an Activation Form in order to have scholarship processed and paid.
- Must successfully complete each semester/course to receive next payment.
- Funds may be used for tuition, book, or other academic expenses, and are paid directly to the educational institution in which the applicant is enrolled.
- Courses previously paid by the scholarship will not be paid a second time.
- Applicant must attend an educational institution in Central Florida.
- Applicant must provide scholarship award letter each semester to the school.
- Fund balance not used for two years will be forfeited unless recipient makes a written request for an extension and committee accepts request.

HOW DO I APPLY?

To apply for the Beatrice B. Ettinger Scholarship, complete and submit an application including the following by the due date listed on the application:

- Completed scholarship application form
- Professional statement
- Letter(s) of recommendation

HOW IS THE APPLICANT SELECTED TO RECEIVE THE BEATRICE B. ETTINGER SCHOLARSHIP

Applications are screened by Central Florida Foundation staff for completeness and eligibility. All eligible applications are then reviewed by the Beatrice B. Ettinger Scholarship Fund Committee which is comprised of fund advisors and community volunteers. Finalists are interviewed and award recipients selected by the Committee. Award notification will be provided by Central Florida Foundation staff.

CONTACT

Daisy C. Franklin, MSW
Community Investment Manager
dfranklin@cffound.org
407-872-3050, ext 13 (office)
407-425-2990 (fax)
Central Florida Foundation
1411 Edgewater Drive
Suite 203
Orlando, FL 32804
The Beatrice B. Ettinger Scholarship assists women with vocational/professional education. Recipients must be women at least 30 years old, full-time residents of Central Florida for the previous 12 months, demonstrate financial need, and have an attainable career goal and/or ability to improve earning capacity/skills.

Application Deadline: April 30, 2014

CONTACT AND RESIDENCE INFORMATION

Date of Birth: ___________________________ Age: ______________
Name: ____________________________________________
                            Last          First
E-mail: ___________________________ Phone #: ___________________________
Address: ____________________________________________
                        Street                              City                             County                 State                        Zip Code
How long have you lived at this address? ______________
Previous address if less than 12 months at current address:
                        Street                              City                             County                    State                      Zip Code
How long did you live at this address? ______________
Marital Status (circle one):   Married  Single  Separated Divorced Widowed
Number of dependents living at home: ___________________________ Ages: ___________________________
Explain if any over age 18: ___________________________________________

EDUCATIONAL BACKGROUND

High School/Vocational School: __________________________________________
Diploma/Date Graduated: ___________________________ GED: Yes or No (circle one)
Undergraduate College/University: __________________________________________
Location: __________________________________________ Dates Attended: ___________________________
Major: __________________________________________ Degree: ___________________________ GPA: __________
Graduate School: __________________________________________
Location: __________________________________________ Dates Attended: ___________________________
Major: __________________________________________ Degree: ___________________________ GPA: __________
Institution you currently attend or plan to attend: __________________________________________
Date of Enrollment: ___________________________ Major or Technical Program: ___________________________ GPA: __________
**FINANCIAL INFORMATION**

<table>
<thead>
<tr>
<th>Place of Employment</th>
<th>Occupation/Position</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**You:**

**Your Spouse, if applicable:**

**INCOME**

- **Your salary:** 
  - Specify hourly rate of pay/ annual salary
- **Spouse’s salary:**
  - Specify hourly rate of pay/ annual salary

- **Other household income:** $________
- **Child Support/Alimony:** $________
- **Grants, Scholarships, Loans, Family Assistance:** $________
- **Financial aid received since:** ______________ $________

**Total Annual Income:** $________

**MONTHLY EXPENSES: BUDGET**

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rent or Mortgage Payment</td>
<td>$________</td>
</tr>
<tr>
<td>Utilities-electric/gas/water/phone</td>
<td>$________</td>
</tr>
<tr>
<td>Child Care/Babysitting</td>
<td>$________</td>
</tr>
<tr>
<td>Car Payments/Insurance/Gas</td>
<td>$________</td>
</tr>
<tr>
<td>Educational Expenses</td>
<td>$________</td>
</tr>
<tr>
<td>Food</td>
<td>$________</td>
</tr>
<tr>
<td>Clothing</td>
<td>$________</td>
</tr>
<tr>
<td>Medical</td>
<td>$________</td>
</tr>
<tr>
<td>Other</td>
<td>$________</td>
</tr>
</tbody>
</table>

**Total Monthly Expenses** $________

**ASSETS:**

| Cash on hand or in banks                  | $________  |
| Stocks/bonds/notes                        | $________  |
| Real estate                               | $________  |

| Other                                     | $________  |
| Personal property                          | $________  |
| Other assets:                              | $________  |

**Total Expenses:** $________

**LIABILITIES:**

| Real estate mortgages                     | $________  |
| Car loan(s)                               | $________  |
| Credit Union/Bank loans                   | $________  |

| Student loans                             | $________  |
| Other notes/loans                         | $________  |
| Total credit card balance                 | $________  |
| Other outstanding debt                    | $________  |

**Total Liabilities:** $________
FINANCIAL EXPLANATION
Please describe any unusual financial circumstances you feel would be important to the Scholarship Committee in evaluating your request:


PROFESSIONAL/CAREER GOALS

Your application must include a brief statement (no more than 2 types pages) outlining your professional goals, career goals, or plans for improving your earning capacity. Include any special circumstances (other than financial) that you feel may help the scholarship committee in evaluating your application.

REQUIRED DOCUMENTS

Please be sure your application includes the following required documents:

- Completed and signed application form
- Professional Statement
- Letter(s) of recommendation

SIGNATURE

I affirm that the above statements are true and correct. I authorize the Beatrice B. Ettinger Scholarship Committee to review my credit rating and confirm my scholastic progress with educational institutions. I will provide a copy of my most recent income tax filing, if asked.

Signature of Applicant       Date

Scholarship finalists will be contacted to schedule personal interview.

CONTACT

Completed applications and any questions should be directed to:

Daisy C. Franklin, MSW
Community Investment Manager
dfranklin@cffound.org
407-872-3050, ext 13 (office)
407-425-2990 (fax)

Central Florida Foundation
1411 Edgewater Drive
Suite 203
Orlando, FL 32804