



Great Falls (MT) Branch

Student Scholarship Application

Due April 30, 2025

Upper class or Graduate Student

Award at Fall Semester 2025

Applicant requirements:

Applicant is a Resident of Cascade County

Applicant is enrolled in a Bachelor's Degree or Graduate Student Program

Applicant is a full time student

Applicant has completed 24 Credits within last 5 years

Applicant is enrolled in a college or university accredited by the Northwest Commission on Colleges & Universities or another association recognized by the council for Higher Education Accreditation

Application instructions:

Submit completed application with all elements

Submit copy of a Student Aid Index

Submit copy of other financial aid awards

Submit current college transcript, official or unofficial

Submit Two letters of reference

Sign the application where indicated -we will verify your enrollment with your enrollment office

The scholarship will be sent to the Financial Aid Office

The awarded scholarship is applied to the tuition due Fall 2025

Call with questions: Marianne Gliko 406-799-6894

Email the full application and its required documents to mariannegliko@hotmail.com or by USPS mail to:

Marianne Gliko

PO Box 73

Monarch, MT 59463



Great Falls (MT) Branch

SCHOLARSHIP APPLICATION for Upper Classmen or Graduate Student

\$3,000.00 Non-renewable Scholarship for Fall Semester 2025

1. Last Name		First	Middle
2. Cascade County Address		City	Zip Code
3. Cell	4. Email		
5. Birthdate	Age	7. Children/Ages	8. Other Dependents (if applicable)
6. Marital Status			
9. College you will be attending next semester/		Field of study	10. Number of credits completed by the end of this semester: Number of credits taking next semester:
11. High School(s) & College(s) attended:			
		Name & Location	Dates
<p>*12. In a 500 word narrative, please describe your reasons for seeking this scholarship to include:</p> <ul style="list-style-type: none"> *Why you are applying for this scholarship *Why you chose the field you're studying and your goals and plans for the future *Previous family/school/work/experience affecting your current status * Sources of income, including grants, loans, employment, family contributions, financial need statement Involvement in school/community activities Have your circumstances changed since your FAFSA document? 			
<p>13. BY YOUR SIGNATURE YOU ARE AUTHORIZING AAUW TO CONTACT YOUR DESIGNATED SCHOOL FOR VERIFICATION OF YOUR TRANSCRIPTS, SAI, (FAFSA), OR REFERENCES</p> <p>Your signature: _____ Date: _____</p>			



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14. References, two names and contact information are required, you are asked to have them send a letter of reference with this application.

Table with 4 columns: Name, Relationship (instructor, advisor, etc), Phone Number, Occupation, Address (email preferred)

15. Must be signed by applicant:

By signing below, I confirm the accuracy of the enclosed information and understand that any false or misleading statements may invalidate my application.

Signature _____ Date _____

Successful receipt of the AAUW Scholarship will have these submitted materials postmarked no later than April 30, 2025:

- Application filled out and signed
The letters of reference
Transcript
SAI
Financial aid funds that were awarded

Optional: Federal regulation requires us to obtain your permission to release your academic or biographical information to AAUW newsletter, committee meetings, possibly the national web site -and/or the media if you win the award. By signing below, I agree that relevant information may be released. You are asked to attend and present your narrative or application at either the May 2025 or September 2025 Great Falls Branch meeting to meet our members who made this possible for you.

Signature _____ Date _____

Mail via USPS to..

AAUW Upper Classmen and Graduate Student Scholarship Committee
c/o Marianne Gliko
P.O. Box 73
Monarch, MT 59463

Or send all materials to mariannegliko@hotmail.com

If questions, please contact Marianne Gliko Cell # 406-799-6894