**Karen M. Gehers/Soroptimist Memorial Scholarship**

This Scholarship is awarded in memory of Karen M. Gehers, to a female Selinsgrove High School senior who is pursuing a degree in accounting, business, or entrepreneurship.

Karen was very dedicated to Soroptimist International, which is a global volunteer service organization for women with almost 66,000 members in more than 120 countries worldwide.

**The Vision** of Soroptimist is: that Women and girls have the resources and opportunities to reach their full potential and live their dreams.

**The Mission** - Soroptimist is a global volunteer organization that provides women and girls with access to the education and training they need to achieve economic empowerment, especially those facing significant obstacles.

**Our Core Values**:

* Gender Equality
* Empowerment
* Education
* Diversity and Fellowship

To learn more about Soroptimist go to soroptimist.org.

Please find attached the application form to apply for this award. Applications are due to:

**Debbie Reichenbach**

**2062 W. Sassafras Street**

**Selinsgrove, PA 17870**

**Application must be received no later than \_4/30/2025\_\_\_\_\_(Mailed by Friday, April 25th)**

**Karen M. Gehers Soroptimist Memorial Scholarship Application**:

Please read and follow the instructions carefully prior to submitting your application. All winners will be notified (enter how we will do this) according to Selinsgrove High School policy.

If selected, you may be asked for documentation to support the data you have provided. Likewise, all correspondence and award agreements will be generated from the personal information submitted below. So, please use proper spelling, capitalization, and punctuation.

**Personal Data**

Tell us about yourself.

Full Name:

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First Middle Initial Last

Birthdate:

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Month/Day/Year

Mobile No.:

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Email:

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Home Address:

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Street City Zip Code

Gender

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Are you a US Citizen? Yes No

Please state your status at the time of application:

I will graduate in May/June 2025

I will be attending college or a university beginning this fall.

I will be attending a trade school beginning this fall.

Are you a first-generation college student?

Yes, I am the first among my parents or grandparents to attend college.

No, either my parents or grandparents have attended college.

What is your career objective?

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Have you submitted any applications for admission? Yes No

Have you been accepted and if so, where: Yes No

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**High School Information**

Are you or will you be a May/June 2025 high school graduate? Yes No

High School Attended

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Most recent cumulative GPA

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High School activities, community activities, volunteer work, honors, offices held (continue on a separate sheet of paper if needed)

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**Extras**

Many scholarships are designed to offer aid to students that represent unique characteristics. Please check each of the qualifiers below that may apply to you. Please note, if you are awarded this scholarship based on any of these qualifiers, you may be asked to produce documentation verifying your unique eligibility.

Have you, or will you, be receiving any other scholarships? Yes No

Name of School you plan to attend to obtain your degree:

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Do you plan to transfer to another college or university to complete your degree? Yes No

Do you have a disability, or do you face any obstacles as you pursue a degree? Yes No

Are you interested and willing to major in Accounting, Business or Entrepreneurship? Yes No

(if an Entrepreneurship, what in specific are you interested in?)

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Do you intend to work while attending college? Yes No

**Essay**

Your essay should be 300-500 words. You should address in your essay: your college or career goals and choice of major, what you intend to do with your education, and why a scholarship is important to you. Include any academic and non-academic accomplishments, personal characteristics, or experiences that make you uniquely worthy of this scholarship consideration. Also please indicate how you meet either the mission, vision, and/or core values of Soroptimist.

Essay

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**Applicant’s Signature**

By signing in the space below, you are certifying that all information is current and that you are the person completing this application. Also, you are giving consent to release your name and photo for media purposes. Please make a copy of this application for your records.

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Signature of Applicant Date