

Women's Eleemosynary Foundation  
Scholarship Committee  
P. O. Box 128  
Worth, Illinois 60482

March 2026

Please complete the application and send it to the above address with a **postmark no later than June 30, 2026**. All accompanying documents including your **transcripts** must likewise bear a postmark no later than **June 30, 2026** in order to be considered. Let me say this again: everything has to be postmarked by **JUNE 30, 2026** to be considered.

The **Verity Statement** simply requires your signature, as does the **Media Release**. The **Affadavit** that requires information about past criminal history needs to be sworn to before a notary. Make certain to include all forms with your completed application. Failure to return all parts of the application will adversely affect your request for scholarship help.

All applications must be submitted by U.S. Mail to the post office box listed at the top of this letter. **Note:** Per U.S. Postal Service, letters and packages are now postmarked with the date they are processed at a postal facility, ***not*** when they are dropped off in a mailbox. Please allow for processing time. **Electronic copies of applications will not be accepted.**

Sincerely,

Scholarship Committee

Women's Eleemosynary Foundation (WEF)

Women's Eleemosynary Foundation  
Scholarship Committee  
P. O. Box 128  
Worth, Illinois 60482

*Convenient Checklist*

Please return to the above address by the postmarked deadline of **June 30, 2026** these items:

- Completed ***application*** – 6 pages
- Completed ***Statement of Verity***
- Completed ***Affidavit – attested by Notary Public***
- Completed ***Media Release Form***
- ***Official transcript*** - from your school

Request that your ***official transcripts*** be mailed by postmarked deadline, so please ask for them from your school as soon as possible.



**WOMEN'S ELEEMOSYNARY FOUNDATION**  
**STUDENT SCHOLARSHIP GRANT PROGRAM**

***Purpose***

The Women's Eleemosynary Foundation (WEF) recognizes the necessity of financial assistance for post-high school education: vocational, undergraduate, graduate, and professional degree programs. Therefore, the WEF establishes the "Student Scholarship Grant Program" for eligible applicants who are enrolled in the aforesaid educational programs.

The WEF will also consider applications on a case-by-case basis for those who are returning to school after a period of absence in order to obtain the necessary training or education to support their families.

***Scope***

The WEF will accept applications based on the qualifications as stated in the "Student Scholarship Grant Program". **Students may apply for a maximum of three (3) times.** Scholarships are specific to the school and educational program named in the application.

***Scholarship Period***

Completed applications and transcripts postmarked by **June 30, 2026** will be eligible for consideration. WEF is not responsible for delays in postmarking or delivery of materials. Awards will be announced on or before **September 30, 2026**. *WEF will not accept late applications or transcripts. It is strongly recommended that you ask your school for your transcripts as soon as possible.*

***Award Payment***

All awards will be made payable to the educational institution and the scholarship recipient. The WEF accepts no responsibility for decreases of other grant or loan amounts due to the awarding of the WEF scholarship grant to a student. Students are solely responsible for all aspects of their financial aid status, and, therefore, should be aware of the consequences of applying for a WEF scholarship.

***Award Process***

1. Selection of the WEF award recipients will be made by the Board of Directors of the WEF. All decisions of the Board will be final.
2. Selection criteria will include, but not be limited to, educational performance, past accomplishments, long range career goals and extracurricular activities. Judging will take into consideration the completed application and transcript information. It is the position of the WEF that the best student is a well-rounded student.
3. All applications and transcripts will be reviewed in strict confidentiality, and the WEF Board will maintain strict confidence by refraining from responding to or engaging in conversations outside of the award process. All decisions will be final.
4. The WEF reserves the right to modify, suspend or terminate this program at its discretion without prior notice.



## STUDENT SCHOLARSHIP GRANT PROGRAM

### ***Eligibility Requirements***

Eligible applicants consist of sophomores, juniors, and seniors enrolled in vocational, undergraduate, graduate and professional degree programs. Enrollment shall conform to those guidelines established by the federal financial aid program: a minimum of twelve (12) credit hours or the equivalent for day students or six (6) credit hours or the equivalent for evening students. Part-time graduate or professional students are also eligible.

A copy of the transcript from the applicant's school must be attached to the completed application form or sent directly by the educational institution on or before the deadline of **June 30, 2024**. In general, applicants will be of the following categories and provide appropriate documentation of their enrollment:

1. Applicants must have successfully completed their freshman year of undergraduate studies before the deadline for filing an application.
  2. In the case of vocational education programs, the student must be currently enrolled in a program and show proof of this.
  3. Graduate students must show proof of their enrollment in their respective graduate or professional programs.
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- Applicants must have a cumulative grade point average of at least 2.0 or better on a 4.0 scale or the equivalent or at least 3.0 or better on a 5.0 scale or the equivalent. Vocational program applicants will need to provide comparable documentation relevant to their success in the program.
  - All applicants must be either citizens or permanent residents. The WEF reserves the right to require proof of this status.
  - An ***Affidavit of Criminal Record*** is attached. This form must be completed in the presence of a Notary Public and returned with the completed application
  - All applicants must sign a statement (***Statement of Verity***) whereby they attest to the truth, correctness, and completeness of their application. Should a question arise in this respect even after a scholarship is granted, the Foundation reserves the right to seek a full reimbursement of the grant. This form must be returned with the completed application.
  - All essay answers must be typed.
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**WOMEN'S ELEEMOSYNARY FOUNDATION  
STUDENT SCHOLARSHIP GRANT PROGRAM  
APPLICATION**

**OFFICE USE**

APPLICATION NO. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please type. Legible printing on this page only is acceptable.**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Permanent Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_ Student ID# \_\_\_\_\_

Name of School Enrolled In \_\_\_\_\_ Major Course of Study \_\_\_\_\_

School Address \_\_\_\_\_ E-mail \_\_\_\_\_

City of School \_\_\_\_\_ State of School \_\_\_\_\_ Zip of School \_\_\_\_\_

Enrollment Status:  Full-Time  Part-Time\*

Citizenship:  U.S. Citizen  Permanent Resident

What year of college will you be in during this award period? \_\_\_\_\_

Are you attending a professional school?  Are you attending a vocational school?

Yearly Tuition (Estimate if necessary) \_\_\_\_\_ Academic Period: From \_\_\_\_\_ To \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

I attest that the statements made in this application are true and complete to the best of my knowledge and hereby authorize the Women's Eleemosynary Foundation to investigate any and all statements and matters contained herein.

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

\* Part-Time and Full-Time Vocational, Undergraduate, Graduate or Professional students are eligible.

\*\* Only students who have successfully completed their freshman year of undergraduate studies are eligible. Please use the following terms: Vocational; Undergraduate, Sophomore, Junior, Senior, 1<sup>st</sup> Year Graduate, or Professional.









### ***Statement of Verity***

I hereby represent and warrant that all information provided herein is true, correct, complete and not misleading. I understand that the Foundation will rely upon the information for its decision. Accordingly, if it is later found to be untrue, incorrect, incomplete or misleading, the Foundation may revoke its decision and/or seek reimbursement of any funds supplied to the applicant.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**This sheet must be signed, dated, and returned with the completed application. Failure to do so may result in the rejection of the application.**

State of

\_\_\_\_\_ County

of \_\_\_\_\_

**AFFIDAVIT**

I, \_\_\_\_\_, a candidate for the receipt of a scholarship award from the Women’s Eleemosynary Foundation, do hereby state under oath and affirm that I have never been convicted of any felonies or misdemeanors save the following:

*Describe in detail*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Further affiant sayeth not. \_\_\_\_\_

*Affiant*

Sworn to and subscribed before me this \_\_\_\_\_.

*Date*

\_\_\_\_\_  
*Notary Public*

**Media Release Form**

I hereby voluntarily authorize the Women’s Eleemosynary Foundation, a Not For Profit Corporation organized under Illinois law and qualified as a 501(c)3 charitable public foundation under the IRS code, (“Foundation”) the right to publish photographs, recordings, videotapes, and other electronic, written, video or audio reproductions of my voice, writings or photographs and likeness(es) of me (“My Media Forms”) for use in Foundation print or electronic publications.

I agree that Foundation may use My Media Forms with or without my name and for any lawful purpose, including but not limited to such purposes as publicity, illustration, advertising, mobile or tablet applications and web content and without compensation to me of any type.

I hereby release and hold harmless Foundation from any reasonable privacy or confidentiality associated with My Media Forms. I acknowledge and agree that publication of My Media Forms confers no rights of ownership or royalties whatsoever.

I hereby release Foundation, its Directors, Agents, and any third parties involved in the creation or publication of the Foundation materials, in which My Media Forms may appear for any claims by me or any third party in connection with my participation.

I have read and understand the above:

Date \_\_\_\_\_

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_