



## Korean Women's Association

3625 Perkins Lane SW  
Lakewood, WA 98499  
T 253-535-4202 | F 253-535-8660

Established in 1972 to provide multi-cultural, multi-lingual social services to Western Washington. Learn more at [kwacares.org](http://kwacares.org).

### Korean Women's Association Scholarship

#### 2022 Application Overview

Korean Women's Association is pleased to announce the opportunity for students to apply for a scholarship to support achievement of their post-secondary educational goals.

For nearly 50 years, the Korean Women's Association has been at the forefront of creating opportunities to the most vulnerable and to empower themselves and their communities. We are motivated by a vision that a strong community makes a better Washington. Our hope is that the scholarship program that has been offered for past 24 years will open the doors of opportunity by giving resources and confidence necessary to compete academically. The KWA Scholarship Program includes awards funded by various donors in order to support students needing financial assistance to begin, continue or complete their post-secondary education.

#### Who is eligible?

To qualify for a Korean Women's Association scholarship, you must:

- Be a resident of Washington State as a citizen or a legal permanent resident;
- Be accepted for college or trade school;
- Meet student status requirements for specific awards:
  - enrolled as a full-time, undergraduate student in a degree-granting program or trade school program **OR**
  - expecting to graduate this year from high school and enroll in a full-time undergraduate degree-granting or trade school program **OR**
  - completing a two-year college or trade program
  - Possess a minimum cumulative GPA of 3.5 (on a 4.0 scale).

#### How are awardees selected?

- The Scholarship Program Committee evaluates applicant by assessing the applicant's academic history, volunteering, and community involvement. In the case of equivalent academic achievement, students with the greatest financial need are given priority. Financial need is determined by the Student Aid Report (SAR), which is provided 3-6 weeks after filing your Free Application for Federal Student Aid (FAFSA) and includes the Expected Family Contribution (EFC) calculation and/or the most recent tax return.

- Scholarships are not renewable and are only applicable to one school year.

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### What is the application process?

To be considered for a Korean Women's Association scholarship award, you must provide the following items:

- ✓ Completed scholarship application
- ✓ One photograph of yourself
- ✓ Short biographical statement
- ✓ Typed essay with an email copy in Word doc.(300 words less)
- ✓ Official transcript of grades (most recent high school transcript for seniors or college transcript for post-secondary students) **sent directly to KWA by the school**
- ✓ Student Aid Report (SAR) **OR**
- ✓ Proof of financial status/income (most recent tax returns or documentation of SSI, public aid or unemployment) (OPTIONAL)
- ✓ Proof of current enrollment or acceptance in a college/university
- ✓ One reference (OPTIONAL)

### What is the application and selection timeline?

The following are key dates for the Korean Women's Association Scholarship Program:

#### **Deadlines / Schedule Scholarship Award**

<b>May 31, 2022, 5pm</b>	<b><i>Deadline for all application materials</i></b>
June 3, 2022	<i>Application Review Completed by Scholarship Committee</i>
June 9, 2022	<i>Awards Notifications</i>
<b>June 16, 2022, 5pm</b>	<b><i>Awards Disbursement and Ceremony</i></b>

### How will I be notified about whether or not I am selected to receive an award?

All applicants will be notified about the Korean Women's Association's decision regarding a scholarship award decision in an email, a phone call no later than June 10, 2022, followed by a post mail.

If you have any questions, please contact  
KWA Office Manager Jasmin Capell at  
[jcapell@kwacares.org](mailto:jcapell@kwacares.org)  
253-535-4202



**Korean Women's Association Scholarship  
2022-2023 Application**

**Please Type or Print:**

**I. PERSONAL INFORMATION**

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

Permanent Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permanent Telephone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth: \_\_\_\_\_

U.S. Citizen or Permanent Resident: Yes \_\_\_\_\_ No \_\_\_\_\_ Last 4 of SS# \_\_\_\_\_

Racial/Ethnic Background (for reporting purposes only): \_\_\_\_\_

**II. YOUR EDUCATION**

High School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

High School graduation date: Month:/Year: \_\_\_\_\_

Do you hold a GED certificate? Yes (Month/Year) \_\_\_\_\_ No \_\_\_\_\_

Name the college/university you attend or plan to attend: \_\_\_\_\_

Address (City/State): \_\_\_\_\_

Course of Study (Major): \_\_\_\_\_

Are you currently enrolled as a full-time college/university student? Yes \_\_\_\_\_ No \_\_\_\_\_

Current Grade Level: \_\_\_\_\_ What is your expected date/year of graduation? \_\_\_\_\_

Estimated cost of post-secondary education per year: \_\_\_\_\_

Have you made a decision about your future career interest or occupation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, specify: \_\_\_\_\_

**III. YOUR SCHOOL COURSES, ACTIVITIES, AND EXPERIENCES**

List Advanced Placement (AP), honors courses and internships that are related to your academic or career interest.

Course or Program	Dates Attended	Grade Earned

List school and community activities in which you have participated, such as varsity and club sports, scouting, church groups and student government. Include memberships in Honor Society, Beta Club and volunteer activities.

Activity	Offices Held	Dates of Participation

List jobs you have held in the past three years.

Job or Kind of Work	Employer	Year of School	Date(s) of Employment	Hours Per Week

List any honors, awards and/or special recognition you have received over the last year.

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**IV. YOUR FAMILY**

Enter complete information about your family. If you do not live with both parents, enter the name of the parent or guardian with whom you live.

	Father/Male Guardian	Mother/Female Guardian
Name		
Occupation/Title		
Employer		

Number of Siblings:

Age(s):

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Are there aspects of your family life or personal circumstances you would like to share with the Selection Committee?

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**V. ESSAY QUESTIONS**

- 1) What role has community service played in your life? **OR**
- 2) How have you overcome your personal challenges?

**VI. FINANCIAL DOCUMENTS (Optional)**

Student Aid Report (SAR) OR Proof of financial status/income (most recent tax returns of the parents and the student or Documentation of SSI, public aid or unemployment) must be attached to your application.

**APPLICANT'S SIGNATURE**

Please review your responses and you sign your name below. Your signature will confirm that the information provided is accurate and true and that you authorize your school to release the information requested on the separate Certification by School Official form. If any information you have provided is false, Korean Women's Association reserves the right to disqualify your application.

**Signature**

\_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please send this completed application form, essay question response and recommendations to the address below. **All application materials must be postmarked by May 31, 2022.**

**KWA Scholarship Program  
ATTN: Jasmin Capell  
3625 Perkins Lane SW.  
Lakewood, WA 98499  
For additional information contact Korean Women's Association at  
253-535-4202, or by Jcapell@kwacares.org**

**2022-2023 Korean Women's Association Scholarship  
CERTIFICATION BY SCHOOL OFFICIAL**

**STUDENT INFORMATION:**

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

Permanent Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permanent Telephone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Name of School or College: \_\_\_\_\_

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**CERTIFICATION BY SCHOOL OFFICIAL (Complete and send directly to Korean Women's Association in a sealed envelope.)**

Please provide the data requested below, and attach an **official transcript of grades** to this questionnaire.

**High School Students Only:**

SAT I Test Date \_\_\_\_\_ SAT I Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_

ACT Test Date \_\_\_\_\_ Composite Score \_\_\_\_\_

Is the student a high school senior? Yes \_\_\_\_\_ No \_\_\_\_\_

Anticipated Graduation Date \_\_\_\_\_ / \_\_\_\_\_  
Month Year

Rank in Class \_\_\_\_\_ Class Size \_\_\_\_\_ Grade Point Average \_\_\_\_\_

**College Students Only:**

Enrollment Date \_\_\_\_\_ Major \_\_\_\_\_

**I certify that the information above is accurate and that an official transcript for the student is attached.**

Name of School Official \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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