

Puget Sound Business Journal's Women of Influence - Lytle Enterprises Scholarship for \$5000

The Puget Sound Business Journal and Chuck and Karen Lytle joined forces to create the Puget Sound Business Journal's Women of Influence-Lytle Enterprises
Scholar-ship Fund. The Women of Influence Awards celebrate the leadership of women in the business world and in the larger community. To be a Woman of Influence, one must evidence not only leadership and achievement in business and in the community, but also be a mentor to other women. This scholarship puts money behind that message. This scholarship will enable a woman of potential to develop her leadership and business acumen in a local graduate school of business. In addition to providing financial support toward the scholarship winner's education, the members of our stellar and prestigious Women of Influence advisory board will make themselves available to mentor her, providing a truly powerful launching pad.

The purpose of this scholarship is to honor and to give financial support to Female students pursuing a graduate level business degree in Washington.

The criteria for application are:

- to be a female student pursuing a graduate business degree.
- to enroll in an accredited educational institution in the state of Washington.
- to demonstrate financial need.
- to be an attendance at the annual "Women of Influence" event (November) (date will be confirmed in award letter)

Interviews are scheduled for Wednesday, April 16 from 9am – noon in Seattle. Presence at the interview is required of all finalists. The *Puget Sound Business Journal* will cover travel costs. (A Skype call may be scheduled in lieu of an in-person interview, if necessary).

Non-traditional students including returning students and older adults are strongly encouraged to apply.

Please Include The Following	P	lease	Inclu	ıde	The	Fol	lowing
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- 1. **Essay**: Write a brief essay (approximately 250 words) telling us about yourself, your educational and career achievements and your goals.
- 2. **References:** Include two reference letters with your application. These letters should be from people who know you through your academic or employment experience or your community leadership and participation. (Do not include relatives as references)
- **3. Personal and Financial Information Form:** Complete the attached form including a statement of how you will pay for additional education expenses beyond this scholarship award.
- 4. **Transcript:** Your full educational transcript must be stamped with an official seal and enclosed with the application.

<u>Deadline:</u> The completed application, plus letters of reference and school transcript, must be postmarked by <u>Tuesday</u>, <u>March 25</u>.

Completed applications should be sent to:

The Seattle Foundation

Attn: Scholarship Program 1200 Fifth Avenue, Suite 1300 Seattle, WA 98101-3151

Verification:	
I affirm that the information included with my application is pursue a degree in higher education. I also understand that my full-time enrollment at an accredited institution and that used toward the cost of my education.	if selected, the awarding of funds is contingent upon
Signature	Date



SCHOLARSHIP PROGRAM(S) FOR WHIC	CH YOU ARE APPLYING:	
Applicant Information		
Last Name:	First:	Middle Initial:
Permanent Mailing Address:		
City:	State:	Zip:
Telephone: ()	E-mail Address:	
Student ID # (if known):	Cumulative GPA:	Class Rank:
Date of Birth: / /	Female □ Male □	
month day year (Optional) Ethnic Origin:	U.S. Citizen Yes □ No □	
School Information (con	mplete applicable sections)	
High School:		Graduation Date: /
City:	State:	month year Zip:
College/University:	otate.	Graduation Date: /
City:	State:	month year Zip:
Graduate School:		Graduation Date: /
City:	State:	month year Zip:
		T.
WHAT OTHER COLLEGES/UNIVERSITIES		Yes Yes
School Name:	Application	Sent: No Accepted: No Yes Yes Yes
School Name:	Application	Sent: No Accepted: No
School Name:	Application	Yes \(\subseteq \text{ Yes } \subseteq \text{ Yes } \subseteq \text{ Accepted: } \(N_0 \subseteq \text{ Accepted: } \(N_0 \subseteq \text{ Accepted: } \)
Verification		
I affirm that the information included we degree in higher education. I understand	ith my application is true and accurate in all resp that if selected, the awarding of funds is continge s will be paid directly to the institution and used t	nt upon my full-time enrollment in an
Signature:		Date:
Parents Signature (if under 18 years old		

THIS SCHOLARSHIP IS NOT AVAILABLE TO RELATIVES OF THE SEATTLE FOUNDATION'S SCHOLARSHIP REVIEW COMMITTEES.



Financial Information Form - CONFIDENTIAL

Applicant Name:	
Please check one: ■ Father/Male Guardian ■ Mother/Female Guardian ■ Self (if independent)	Please check one: Mother/Female Guardian Father/Male Guardian Spouse
Name:	Name:
Address:	Address:
Occupation:	Occupation:
Employer:	Employer:
Home Phone: ()	Home Phone: ()
Work Phone: ()	Work Phone: ()
Annual Income (before taxes/gross)	
Father/Male Guardian	\$
Mother/Female Guardian	\$
Student	\$
Spouse	\$
Other (Please specify: child support, welfare, social security, etc.) .	\$
Total family income earned during most recent tax year	\$
Total family size:	
Number of dependents other than you currently attending	college:

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Applicant Name:
Financial Information Form (continued)
Please write a statement of your financial need for assistance. Also address how you are contributing toward your education expenses for the coming college year through additional financial aid, employment, or other income.

Applicant Name:

Community service, extracurricular activities, prior awards or scholarships

You may submit a resume (two pages maximum) in lieu of this page.

List all **school activities** in which you have participated in during the past five years (e.g. student government, music, athletics, etc.). List all **community activities** in which you have participated without pay during the past five years (e.g. community volunteer). Note **special awards**, **honors** and **offices held**.

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Paid and Unpaid Work Experience

Describe your work experience during the past five years (e.g. internships, office work, babysitting, etc.). Indicate dates of employment for each position and approximate number of hours worked each week.

Employer:				Position:	
From (month/year)	/	to	/	Hours/Week:	
Employer:				Position:	
From (month/year)	/	to	/	Hours/Week:	
Employer:				Position:	
From (month/year)	/	to	/	Hours/Week:	
Employer:				Position:	
From (month/year)	/	to	/	Hours/Week:	