

# Soroptimist International of The Sierras "Furthering Your Dream" Award

First

Middle

Last

Address:

(Street Address or P.O. Box, including any c/o or Unit number, City, Zip)

Telephone: Home: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Email address: \_\_\_\_\_ Citizenship \_\_\_\_\_

Field of Study/Major for BA/BS, certificate, or graduate studies: \_\_\_\_\_

Title of Thesis/Dissertation (if applicable): \_\_\_\_\_

Name of Institution Attending: \_\_\_\_\_

Units Completed \_\_\_\_\_ Units Remaining: \_\_\_\_\_ Date of Completion: \_\_\_\_\_

Are you a recipient of a Soroptimist Live Your Dream Award? Y / N: From what club? \_\_\_\_\_

**ALL OF THE FOLLOWING ITEMS MUST BE INCLUDED, PLUS THIS APPLICATION, OR THE ENTIRE PACKAGE WILL BE DISQUALIFIED.**

1. Description of program of study/major/certification program, and any featured, related projects:  
Submit a minimum of two, maximum of four pages, double spaced, and 12 pt. font.
  - a. Include a statement of your career goals. Please explain how you are pursuing a course of study non-traditional for women, or that which will improve the lives of women/girls.
  - b. Include a statement of your advancement in your program.
2. Autobiography: Submit a maximum of three pages, double spaced, 12 pt. font.
  - a. Include family background, volunteerism, co-curricular activities, hobbies, interests, etc.
3. Transcripts of all undergraduate/graduate work completed and proof of school/ program registration.
4. **Two** confidential letters of recommendation. They must be emailed separately, but must arrive by **November 15**, (not from family) preferably from:

Department Chair Name: \_\_\_\_\_ Email: \_\_\_\_\_

Faculty Member Name: \_\_\_\_\_ Email: \_\_\_\_\_

**MATERIALS OTHER THAN LETTERS OF RECOMMENDATION MUST BE SENT IN A SINGLE EMAIL TO THE FURTHERING YOUR DREAM CHAIR AT THE ADDRESS BELOW. ALL MATERIAL MUST BE TRANSMITTED NO LATER THAN **NOVEMBER 15**. FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN DISQUALIFICATION. SEND EMAIL TO: [SISIERRAS@SOROPTIMIST.NET](mailto:SISIERRAS@SOROPTIMIST.NET)**

**CHECK TO CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT AS OF THE DATE BELOW.**

: (Check to indicate applicant compliance.) Date: \_\_\_\_\_

**NOTE: SEMIFINALISTS WILL BE REQUIRED TO APPEAR FOR AN INTERVIEW (TELEPHONIC) IN **MAY**. FINALISTS WILL BE NOTIFIED AND INVITED TO ATTEND A SOROPTIMIST INTERNATIONAL OF THE SIERRAS MEETING TO BE RECOGNIZED BY SOROPTIMIST MEMBERSHIP, AND TO RECEIVE THEIR AWARD.**