## 2025

# WOMEN IN STEM SCHOLARSHIP APPLICATION FORM



## SEND APPLICATION AND DIRECT ANY QUESTIONS TO:

Deadline:	30.06.2025	_		
Zonta Club/e-Club of:	Bochum			
District/Area:	29/05	-		
Attention: Address: City/State: Province/Country:	DrIng. Petra Donner			
Telephone:		-		
Email address:	stem@zonta-bochum.de	<u>-</u>		
Name: Last (Family)	- First			Middle
Permanent mailing address:				
City:			Cou	ntry:
Email address:			Telephone:	
LinkedIn address:	_		Twitter handle:	
Address during academic yea	r (if different):			
City:	State:	Postal Code:	Co	untry:
Secondary email address:	-		Telephone:	
Birth date:			Country of citizensh	p:
Name of university/college/ir	stitute currently attending:			
Current year of study:		_		
Department:		_ Major/field o	f study:	
Plans for study under the Wo	men in STEM Scholarship:			
Degree sought:				
Expected graduation date (inc	clude month/year):			

#### Academic background

Your application must include official detailed transcripts of grades or equivalent records from all universities, colleges, or institutions attended, including undergraduate institutions. An explanation of the grading system must be included for each transcript. **Please add your current degree sought and expected graduation date (month/year).** Please ensure all transcripts are legible.) **Do not** upload **unofficial transcripts** as they will not be accepted.

In the tables below, please list the institutions you have attended:

University/College	(Year) to (Year)	Major Field	Degree	Date Degree Received/ Anticipated

#### **Employment history**

From (month/year)	To (month/year)	Name of Employer	Address	Type of work or position held

#### Scholarships, fellowships, honors received (please give dates):

(Year) to (Year)

#### **Other activities**

(Please describe your volunteer, non-scholastic activities, memberships and cultural interests):

#### Recommendations

Please use the following fields to name and send a recommendation letter request to one faculty member in the major field of study and one to an organization supervisor, employer, volunteer supervisor or academic adviser. Note that a faculty member in the major field of study must be one of the referees. These recommendations are confidential, and you will not be able to view the completed responses. It is the responsibility of the applicant to make sure these recommendations have been turned in by the Zonta club's deadline.

Please list below those referees who will submit recommendations:

Name	Position	Title	College/university/institute/ company
1.			
2.			

#### **Declaration by Applicant**

I certify that all of the information contained in my application form is accurate to the best of my knowledge and that I did not receive assistance in completing the essay portions of this application other than for translation into English for advancing to district/region and international levels. I understand that, at the option of the Zonta club sponsoring my application or the Zonta district/region, or Zonta International, I may be interviewed as a candidate for the Women in STEM Scholarship. I consent to the electronic or hard copy publication of material in my application by Zonta International.

I confirm that I have not applied to more than one Zonta district.

I confirm that I am not a family member (ancestor, descendant, adoptee, sibling, niece or cousin and those of their spouse or co-habiting partner) of a club member or individual with direct membership with Zonta International, and/or employee of Zonta International.

I confirm that I have not applied for the 2023 Zonta International Jane M. Klausman Women in Business Scholarship.

#### Signature (required)

Date

(Insert image of your signature or print, sign and scan this page.)

#### **Data Protection**

Zonta International and Zonta Foundation for Women take the security of your data seriously. We will never sell, trade or rent your personal information provided in this application to third parties. By submitting this application, you agree to the use of your data in accordance with the *Privacy Policy and Publicity Authorization Form* contained in the application documents (see page 8 of the application).

(Please check the appropriate items.)

#### **Professional information and goals**

#### (Please type essay.)

In 500 words or less, please describe your academic and/or professional goals, the relevance of your program, how you have demonstrated initiative, ambition and commitment to pursuing a career in STEM, and how the Zonta International Women in STEM Scholarship will assist you in reaching your goals. (Essays cannot exceed 500 words to be considered.) Please provide the word count at the end of your answer.

Please type essay .... Not more than 500 words.....



Zonta International Recommendation for the Women in STEM Scholarship

Please return t	his form by:			
		Applicant's signature is requ	<b>iired</b> (Insert image of you	r signature or print, sign and scan this page.)
Applicant:			-	MCJ JI-
	Last (Family) Name		First	Middle
Recommenda	tion from:			
		Name		Position/Title

#### College/university/institute/employer

The applicant above has applied for a Zonta International Women in STEM Scholarship. Zonta International greatly values and appreciates your opinion. Please discuss the applicant's accomplishments; current academic program and/or work experience; intellectual independence; capacity for analytical thinking; ability to organize and express ideas clearly; creativity; motivation; and potential for learning and succeeding in a STEM-related program. You may write your recommendation letter on letterhead of your choice, but you must sign and submit the letter with this form.

How well do you l	know the applicant?					
Please rate the ap	plicant with respect	to your experiend	ce with other s	students/employe	es in this field/position:	
Exceptional Top 5%	Very Good Next 10%	Good Next 15%	Average Next 30%	Below Average Last 40%	Insufficient opportunity to observe	
Referee's signature	s required (Insert imag	e of your signature	e or print, sign a	nd scan this page	Date	

Return form to	Mailing	
Zonta Club of:	Address:	
City:	State/Province:	
Postal Code:	Country:	
Fax:	Email Address:	



Zonta International Recommendation for the Women in STEM Scholarship

Please return this form by:		
Applicant's si	gnature is required (Insert image of you	r signature or print, sign and scan this page.)
Applicant:	Plant.	
Last (Family) Name	First	Middle
Recommendation from: Nar	ne	Position/Title
Colle	ege/university/institute/employer	
The applicant above has applied for a Zonta In and appreciates your opinion. Please discuss experience; intellectual independence; capacity creativity; motivation; and potential for learn recommendation letter on letterhead of your choi	the applicant's accomplishmen y for analytical thinking; abil ing and succeeding in a ST	ts; current academic program and/or work ity to organize and express ideas clearly; EM-related program. You may write your
How well do you know the applicant?		
Please rate the applicant with respect to your ex	perience with other students/em	ployees in this field/position:
Exceptional Very Good Good	Average Below Average	le Insufficient opportunity to

Exceptional Top 5%

Very Good Next 10%

Good Next 15% Below Average Last 40%

Insufficient opportunity to observe

Referee's signature is required (Insert image of your signature or print, sign and scan this page.)

Date

Return form to	Mailing	
Zonta Club of:	Address:	
City:	State/Province:	
Postal Code:	Country:	
Fax:	Email Address:	

Next 30%



## Verification of Current Enrollment Form Women in STEM Scholarship

'n
ation date)
-

(Official University/College Stamp)



## Zonta International Women in STEM Scholarship Program

### **Privacy Policy and Publicity Authorization**

Zonta Club of Bochum, Zonta International and the Zonta Foundation for Women are committed to honoring the privacy and wishes of all of our Women in STEM Scholarship recipients at all times. In order to do this, please read the following information carefully and indicate your agreement as appropriate.

1. Most data collected by Zonta International and the Zonta Foundation for Women is used only to help Zonta better serve its scholarship recipients. It is our general policy to collect and store only personal information that our recipients knowingly provide. Zonta does not sell, trade, or rent your personally identifying information to third parties. Except as described in paragraph two, we take reasonable measures not to disclose personally identifying information about you.

I have read the above paragraph and agree to the Terms and Conditions therein.

- 2. From time to time, Zonta International and the Zonta Foundation for Women conducts various marketing activities to promote the Women in STEM Scholarship Program. In addition, to ensure Zonta's ability to fund the scholarships, the Zonta Foundation for Women may from time to time provide information to donors to the Women in STEM Scholarship Fund about recipients of their donations. Zonta retains the right to use your name, photograph and biographical information to promote the Women in STEM Scholarships in various promotional materials, including the website.
  - I have read the above paragraph and agree to the Terms and Conditions therein.

Applicant's signature is required (Insert image of your signature or print, sign and scan this page.)

Date

Please print your name



#### How did you learn of the Women in STEM Scholarship?

Checklist to be completed by applicant

Social media	Official detailed transcripts (from all universities/colleges/institutions attended)	
Department/teacher	Translated transcripts in English (from all universities/colleges/institutions attended)	
Directory of grants at university financial aid office	Recommendations (2)	
Directory of grants not at university (e.g., public libraries)	Recommendation Waiver Form	
Previous recipient (name):	Signatures	
Zonta club name:	Other:	