

Applicants must be a current club member or referred by a member. NOTE: The deadline to submit an application is July 11, 2024 at 5PM PST.

Last Name:	First Name:	M.I:
Street Address:		Apartment/Unit #
City:	State:	Zip Code:
Phone:	Email Address:	
Eligibility		
I am registered to vote i	n the State of Nevada as a "Democrat": Yes_	No
I am or will be attending	g an institution of higher education in the St	ate of Nevada: Yes No
School you plan to atten	ıd:	
I am a current member o	of the Women's Democratic Club of Clark Co	ounty: Yes No
I was referred by a curre	ent member of Women's Demo: Yes	No
Name of member who re	eferred you:	
Relationship:	Email Address:	Phone:
Education Hist	ory	
		GPA:
From: To:	Date of graduation:	
6	Did you graduate?	GPA:
From: To: Date of Graduation:	Did you graduate?	Yes No
Other: From: To:	Did you graduate?	GPA: Yes No

_Degree: _____

Date of Graduation:

ESSAY I - Why are you a Democrat?

ESSAY II - Please tell us a little about your efforts on behalf of Democratic candidates and/or causes and/or community service:

ESSAY III - What differentiates you from other candidates who may seek this scholarship?

Please free to tell us anything else about yourself that you feel we should know as we consider your application:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge

Signature

Date

You may snail mail this application to P.O. Box 759, Las Vegas, NV 89125. Questions? <u>info@womensdemo.com</u>