



2021 Joan McNeely Working Women Scholarship Application

**Business and Professional
Women's Club of Coshocton**

NAME: _____

ADDRESS: _____

TELEPHONE NUMBERS: Home _____ Work _____

Cell _____ E-mail _____

HIGH SCHOOL ATTENDED: _____

GRADUATION DATE: _____ or GED DATE: _____

CURRENT EMPLOYER: _____

(Check One) FULL TIME: _____ or PART TIME: _____

MARRIED? YES / NO NUMBER IN HOUSEHOLD: _____

WHAT COLLEGE ARE YOU ATTENDING OR COLLEGE ENROLLED TO ATTEND:

IF PLANNING ON ATTENDING, YOUR ANTICIPATED ENROLLMENT DATE: _____

ANTICIPATED GRADUATION DATE: _____

Please mail completed application to Coshocton BPW, PO Box 656, Coshocton OH 43812 OR email to: bpwwscholarship2021@gmail.com