



Beverly J. Smith Memorial Scholarship

American Association of University Women
Harrisburg Branch

\$2,500 Scholarship Awarded Annually
2025-2026 Academic Year

The **Beverly J. Smith Memorial Scholarship** was established by the Harrisburg Branch of the AAUW to honor our past president. Ms. Smith was a nationally known and respected expert on refugee resettlement and immigration. She devoted her life to helping people of diverse nationalities begin new lives and obtain education, homes, health care, and legal advice. We want to honor her memory by assisting the education of a woman working towards a bachelor's degree. We would especially like to assist someone who embodies Ms. Smith's vision.

Eligible candidates must meet the following criteria:

1. Permanent resident of Dauphin, Cumberland, or Perry County or Northern York School District
2. Attending an accredited college or university located in Pennsylvania
3. Female student having completed at least 60 credits toward a bachelor's degree by end of Spring 2025 term
4. Enrolled as a full-time student in the Fall 2025 term
5. Demonstrated academic achievement with at least a 3.4 GPA
6. Demonstrated financial need

Applicants must submit the following materials by July 31, 2025, to AAUW Harrisburg, Scholarship Committee, P.O. Box 60911, Harrisburg, PA 17106-0911:

1. Completed application
2. **Official** transcript through Spring 2025 term
3. Financial Aid Form
4. Verification of enrollment
5. Essay
6. 2 personal references (1 of which must be academic)

Additional information and application materials are available on the AAUW website:

<http://harrisburg-pa.aauw.net>. The Harrisburg Branch of AAUW may be contacted by email at HbgAAUWScholarship@gmail.com.

Deadline: Postmarked or received by email July 31, 2025

Deadline for Submission: Postmarked or received by email July 31, 2025

Return to: Scholarships, AAUW Harrisburg, P.O. Box 60911, Harrisburg, PA 17106-0911

Or via Email: HbgAAUWScholarship@gmail.com

Rev. 03/27/2025



Beverly J. Smith Memorial Scholarship

Applicant: _____

Date: _____

Include your name at the top of each page. Complete the Application and Essay. Obtain references. Request financial aid information. Be sure to include additional documentation and information as directed. Type or print neatly.

Part I. APPLICATION

Contact and Residence Information

Permanent Address:	
Street City, State, Zip	
County:	
Phone:	
Email:	

Current Address (if different from above):	
Street City, State, Zip	
County:	
Phone:	
Email:	

High School and College(s) Attended				
Name	City/State	Dates Attended	Credits Completed	Graduation Date MM/YYYY

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Beverly J. Smith Memorial Scholarship

Applicant: _____

Date: _____

Major Course of Study:

Cumulative GPA as of last semester:

(Note: An **official** college transcript through Spring 2025 term must be sent to AAUW Harrisburg from your college or university.)

Extracurricular Activities (include employment, if applicable)		
Activity	Involvement	Approximate hours per month

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Beverly J. Smith Memorial Scholarship

Applicant: _____

Date: _____

Part II. ESSAY QUESTION

Please type or print neatly and limit your response to one page and 300 words maximum

Essay Question:

AAUW's mission is to advance equity for women and girls through advocacy, education, philanthropy, and research.

Beverly Smith's philosophy of life could be summarized in the following Chinese proverb she favored:

*Tell me, I forget
Show me, I remember
Involve me, I understand*

How would your goals in life and field of study allow you to incorporate the values of AAUW and Beverly Smith?

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Part III. References

Using the forms provided with this application, please submit **two** personal references. At least **one** of your references must be **academic**.

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AAUW Harrisburg Branch Scholarships

Part IV. DOCUMENTATION:

**Consent to Release Educational Records
Official Transcript
Proof of Enrollment
Financial Aid Information**



AAUW Harrisburg Branch Scholarships

Applicant Name: _____ Date: _____

CONSENT TO RELEASE EDUCATIONAL RECORDS TO A THIRD PARTY ***NOTE: PRIVACY ACT ENFORCED***

I, _____, hereby request and give my consent to the release of those educational records specified below to the AAUW Harrisburg, Scholarship Committee, P.O. Box 90611, Harrisburg, PA 17106-0911.

It is further understood that the college or university will inform the above-named applicant that any and all information contained in those educational records may not be transferred to another third party without her written consent.

Materials to be released:

1. **Official** Transcript
2. Scholarship Financial Aid Form
3. Verification of Enrollment

Reason for this release:

Application for AAUW Harrisburg Branch Scholarship

Student Signature

Date

Student ID Number



AAUW Harrisburg Branch Scholarships

Applicant Name: _____ Date: _____

FINANCIAL AID FORM

To be completed by the Financial Aid Officer at the Institution the applicant plans to attend during the 2025-2026 academic year.

Student Name:	
Student ID#:	
Permanent Address:	
School/College Name:	

Student enrollment for fall 2025 term: Fulltime At Least Halftime Less Than Halftime
 Grade Classification for fall term 2025: Freshman Sophomore Junior Senior
 Student Status: Dependent Independent
 Has this student filed a FAFSA for the 2025-2026 academic year? Yes No

Annual Costs for 2025-2026 Academic Year	
Tuition	
Required Fees	
Room and Board	
Books and Supplies	
Other Expenses (explain)	
Total Cost of Attendance	

2025-2026 Student Aid Index	
Parent(s) Contribution	
Student's Contribution	
Total	

Student Name:	
Student ID#:	



AAUW Harrisburg Branch Scholarships

Applicant Name: _____ **Date:** _____

Financial Aid: Actual or Estimated

2025-2026 Financial Aid	
A. Gift Aid	
College Grants (need based)	
PELL	
PHEAA	
FSEOG	
Private Scholarships	
Institutional Scholarships	
B. Self-Help	
Subsidized Federal Direct Loans	
Unsubsidized Federal Direct Loans	
Federal Work Study	
C. Other Aid (please identify each)	
Total	

This certifies that the information provided reflects data currently on file at this institution and is correct as of this date. It is understood that grants and loans for 2025-2026 may not be firm. This estimate or actual profile of assistance will provide AAUW Scholarship Selection Committee with information to determine the student's financial need.

Name of Financial Aid Officer:	_____
Phone Number:	_____
Email Address:	_____

Signature _____ **Date** _____