Scholarships: Up to $1500 per applicant

The Upper Keys BPW Scholarship program is designed to help women gain a professional edge through educational efforts. Particular emphasis is given to individuals who demonstrate strong character, professional collaborative efforts with other women and are, or have, the potential to be a strong role model for the current and next generation of working women.

Scholarships may be used for certifications, training classes, or classes and required materials for higher educational degrees. Transportation, room and boarding costs, or fees and CEU’s associated professional licensing requirements are eligible.

Minimum requirements for applicants include:
- High School diploma/GED,
- Upper Florida Keys resident for at least 3 years.
- Minimum of 5 years post-high school work experience

To Submit: Applications may be submitted to ukbpwscholarship@gmail.com Applications are reviewed twice per year and deadlines are April 15 and September 15. Additional information may be requested from scholarship committee upon review of the applications.

Thank you for applying to the UKBPW Adult Woman Scholarship Program!

Name: _______________________________________________________________________
Complete Address: _______________________________________________________________________
How long have you lived in the Upper Florida Keys? _________
Phone: ____________________________
Email: _________________________________________________________________________
List general information about yourself, include, organizations you currently belong to, and any other community involvement that service our community.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

List your education and professional goals. Explain how your request will impact your future.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

List your educational and professional achievements.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

__________________________________________________________________
Please provide an itemized list of educational costs you are asking to be covered in this scholarship, and a timeline for completion.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

If this scholarship application does not cover the entire cost of the specific education or professional goal, where will the additional money needed come from?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

If awarded a BPW Scholarship, how would you use the education you received to impact our local community and/or BPW?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Statement of Accuracy:
I attest that all the information included in the application is true and accurate as I have presented it.

Applicant Signature: ________________________________ Date: __________