



TAKE YOUR NEXT STEP FORWARD!

AN EDUCATION/TRAINING AWARD In honor of Gini Craig, Founding Member

TO BE AWARDED TO A DESERVING WOMAN IN SAN DIEGO COUNTY NEEDING HELP IN ACHIEVING THE NEXT STEP FORWARD IN HER SUCCESS – A HAND UP TO TURN HER LIFE AROUND

Recipient may use the cash award of \$1500.00 to offset any costs associated with her efforts to attain higher education or training including tuition, books, childcare and transportation.

The successful recipient will have overcome poverty, domestic or sexual violence, abuse or neglect.

Take your NEXT STEP FORWARD!



NEXT STEP FORWARD

Application Instructions

Deadline: Applications are due by December 1st. Award recipients will be notified between January and June.

Applicants will be selected for awards. Applications can only be submitted once per year. Your application will be reviewed by a panel of judges, but all information will remain confidential and will not be shared without your permission.

Step 1: Determine if you are eligible. You are eligible if:

- You are a woman who has overcome violence, abuse or neglect.
- You have financial need.
- You are enrolled in or have been accepted to a vocational/skills training program or an undergraduate degree program.
- You are motivated to achieve your education and career goals.
- You reside within San Diego County and are a United States citizen. (a social security number is required; however, you will not be asked to share this information unless you have been given an award.)
- You do not have a graduate degree.
- You are not a Girlfriends Care member or employee and not an immediate family of either.

Step 2: Tell us about yourself

Fill out the award application telling us about yourself. Your information will be kept confidential and shared only with the evaluators unless you give us written permission to use your story to publicize the program.

Step 3: Ask people to tell us about you

You will need two different people – who are not related to you – to fill out the reference forms you received with this application. It is recommended that you request references from people who know you from an educational, work or organizational setting. Please email this form to your references and request they email the forms back to you when completed. Only two references will be accepted. Please use the form and do not submit reference letters.

Step 4: Submit your application

Attach your application and two reference forms to an email and send to nextstepforward@girlfriendscare.org by December 1st. Incomplete applications or applications received without reference forms will not be considered.

Questions:

Send an email to nextstepforward@girlfriendscare.org or check out the NEXT STEP FORWARD Frequently Asked Questions at <http://girlfriendscare.org/next-step-forward>.

Ready to Apply?

Begin your application on the next page. We wish you the best of luck in achieving your NEXT STEP FORWARD in your educational and professional goals!



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Application

APPLICANT INFORMATION

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date of Birth: _____ Marital Status: _____

Highest Level of education achieved: _____ Date Completed: _____

Are you a citizen of the United States? YES NO

Are you working while you are studying? YES NO

If working: How many hours per week? _____

Where do you work? _____

Number of Dependents you support:
(don't include yourself) _____

Ages of Dependents: _____

How are your dependents related to you? _____

EDUCATIONAL AND CAREER GOALS

What is the name of the school or training program you are attending or have been accepted to?

What are you studying? _____

When will you complete your studies? _____



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EDUCATIONAL AND CAREER GOALS (Continued)

In 300 words or less, please tell us about your career goals and give specifics about how your education and training supports these goals. (If you need more room, continue your answer on a separate piece of paper)



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FINANCIAL INFORMATION

Award recipients are chosen in part based on financial need. Please share information about your annual income and expenses. Please be as exact as you can.

A. Income:

Please list your ANNUAL household income and savings (from the money you have left after taxes) in the chart below.

Employment:	\$ _____ per year	Government Assistance:	\$ _____ per year
Savings:	\$ _____ per year	Social Security (U.S. Only)	\$ _____ per year
Child Support:	\$ _____ per year	Loans:	\$ _____ per year
Alimony:	\$ _____ per year	Scholarships:	\$ _____ per year

Please list any additional income, including income other household members receive.

Source:	_____	\$ _____ per year
Source:	_____	\$ _____ per year
Source:	_____	\$ _____ per year
Source:	_____	\$ _____ per year

TOTAL ANNUAL INCOME: \$ _____ per year

B. Expenses:

Please list your ANNUAL household expenses in the chart below:

Housing:	\$ _____ per year	Utilities:	\$ _____ per year
Food:	\$ _____ per year	Medical:	\$ _____ per year
Childcare:	\$ _____ per year	Transportation:	\$ _____ per year
Tuition:	\$ _____ per year	Books:	\$ _____ per year

Please list any additional expenses, including expenses other household members receive.

Expense:	_____	\$ _____ per year
Expense:	_____	\$ _____ per year
Expense:	_____	\$ _____ per year
Expense:	_____	\$ _____ per year

TOTAL ANNUAL EXPENSES: \$ _____ per year



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TELL US MORE ABOUT YOURSELF

The Girlfriends Care NEXT STEP FORWARD Award is all about helping women who have faced economic and personal hardships to overcome adversity, and who can achieve even more through training and/or education to build a better life for themselves and others. Do you think this award could help you take that NEXT STEP FORWARD in your success? In 750 words or less, tell us about the challenges you've faced and how you think this award could make the difference in your life. (If you need more room, continue your answer on a separate piece of paper)



NEXT STEP FORWARD

TELL US MORE ABOUT YOURSELF (Continued)

HOW DID YOU HEAR ABOUT THE NEXT STEP FORWARD AWARD?

AGREEMENT

Please read the following information carefully. When you type your name below, you are agreeing to what you have read.

I certify that my answers are true and complete to the best of my knowledge. I will notify Girlfriends Care if there are any changes.

I certify that this is the only application I have made for this award this year – in any format to any address.

I understand that my application may be submitted electronically for evaluation.

I understand that my application becomes the property of Girlfriends Care. The application will be considered confidential unless the applicant grants Girlfriends Care written permission to release personal information for the purposes of publicizing the award.

By typing or signing below, you adhere to the above requirements:

Signature: _____ Date: _____

**Thank you for applying for the
NEXT STEP FORWARD Award**

Congratulations on all you have achieved so far!