POLISH JUNIOR LEAGUE OF MASSACHUSETTS, INC.

SCHOLARSHIP APPLICATION

(please indicate which scholarship you are applying for)

_____ Undergraduate _____ Josephine Karwoski Memorial

_____ Helen Weber Memorial

Name in Full _____ Marital Status _____

Date of Birth _____/_____/_____ Place of Birth _____

Permanent/Voting Address _____

Home Phone (____)~_____ Cell Phone (____)~_____

Name of Parents (or Guardian) _____

Percentage of Polish Ancestry: Mother _____ Father _____

Mother's Maiden Name _____

Undergraduate School _____ Major _____ GPA _____

Graduate School _____ Major _____ GPA _____

School you are planning to attend during 2027/2028 _____

Location _____

Anticipated Date of Graduation _____

Intended Major _____ Have you been accepted (*circle*) YES NO

How did you hear about these Scholarships _____

PERSONAL DATA:

Current Occupation _____

Name and Address of Employer _____

Employer's Phone (_____) _____~_____ Years Employed _____

Will you be employed during the school year? *(Circle)* YES NO

What amount will you *personally* contribute toward college expenses $_____

Are you currently receiving financial aid through your college? *(Circle)* YES NO

What amount will you finance through loans/scholarships? $_____

Are you related to a member of the Polish Junior League? *(Circle)* YES NO

If yes, member's name _____ Relationship _____

Have you ever received a Polish Junior League Scholarship? *(Circle)* YES NO

If yes, what year? _____ What amount? _____

ESSAY:

ON A SEPARATE SHEET OF PAPER, TYPE A **ONE-PAGE** ESSAY DISCUSSING YOUR EDUCATION, CAREER GOALS, YOUR **POLISH HERITAGE**, AND HOW THIS AWARD WILL HELP YOU REACH YOUR GOALS.

IN ADDITION TO ***ONE LETTER OF RECOMMENDATION (Must be dated in 2027)***, please provide TWO ADDITIONAL REFERENCES. **(EXCLUDE** family members.)

1. Name _____ Phone (_____) _____ - _____
   Address _____
   Relationship to Applicant _____

2. Name _____ Phone (_____) _____ - _____
   Address _____
   Relationship to Applicant _____

I, _____, the applicant, hereby sign this form and state that all information supplied in conjunction with this application is correct and true.

Signature _____ *Date* _____

* * * * COMPLETED APPLICATIONS AND OFFICIAL TRANSCRIPTS MUST BE RECEIVED BY MAY 1, 2027 * * * *

MAIL COMPLETED APPLICATION AND ALL PAPERWORK TO:

Polish Junior League of Massachusetts, Inc.
ATTN: Scholarship Chairperson
40 May Street
Chicopee, MA 01020

Or EMAIL COMPLETED ALLICATIONS AND PAPERWORK TO:
PJLOFMA@gmail.com

Fall 2025 and Spring and Fall 2026 Official Transcripts, with Seal, are Required From your school

POLISH JUNIOR LEAGUE OF MASSACHUSETTS, INC.

SCHOLARSHIP APPLICATION RULES AND CHECKLIST

ELIGIBILITY:

All applicants for the *Helen Weber Scholarship*:

1. MUST be of Polish heritage. Non-biological children of Polish parents, regardless of race or ethnicity, are encouraged to apply and are given equal consideration.
2. MUST have a permanent address in Western Massachusetts (Berkshire, Franklin, Hampshire or Hampden County)
3. MUST be enrolled in the **sophomore year (36 credits minimum)** at a four-year accredited College or University. Students who are completing a two-year program at a Community College and have been accepted and are transferring to a four-year College or University are eligible to apply.
4. MUST be a Media or Communication Specialist, Library Science, or Journalism major.
5. Have *never* received an Undergraduate Scholarship from the Polish Junior League of Massachusetts, Inc.

All applicants for the *Undergraduate Scholarship:*

1. MUST be of Polish heritage. Non-biological children of Polish parents, regardless of race or ethnicity, are encouraged to apply and are given equal consideration.
2. MUST have a permanent address in Western Massachusetts (Berkshire, Franklin, Hampshire or Hampden County)
3. MUST be enrolled in the **sophomore year (36 credits minimum)** at a four-year accredited College or University. Students who are completing a two-year program at a Community College and have been accepted and are transferring to a four-year College or University are eligible to apply.
4. Have *never* received an Undergraduate Scholarship from the Polish Junior League of Massachusetts, Inc.

All applicants for the *Josephine Karwoski Memorial Scholarship:*

1. MUST be female.
2. MUST be of Polish heritage. Non-biological children of Polish parents, regardless of race or ethnicity, are encouraged to apply and are given equal consideration.
3. MUST be currently enrolled or accepted to a graduate degree program, OR a non-traditional student returning as an undergraduate student at a four-year accredited College or University.
4. MUST have a permanent address in Western Massachusetts (Berkshire, Franklin, Hampshire or Hampden County)
5. Have *never* received a Helen Weber, Undergraduate or Josephine Karwoski Memorial Scholarship from the Polish Junior League of Massachusetts, Inc.

SCHOLARSHIP CRITERIA: In order for your application to be considered, the following must be met:

1. This application must be complete, neat, and printed neatly (no cursive) and can be submitted via email.
2. This application and all of its supporting information must be received by the Scholarship Committee Chairperson no later than the firm deadline of ***May 1, 2027***. (Supporting documents are: *one written letter of recommendation dated in 2027, one-page essay on Polish Heritage and goals, and Fall 2025-Spring 2026-Fall 2026 college transcript.).*
3. Official college/university transcripts must be supplied by your school and received no later than the ***firm*** deadline of ***May 1, 2027*** (Official Transcript with Embossed Sea if sent by mail) Digital Transcripts will be accepted from the school or their agents.
4. A one-page essay discussing your **education**, **career goals** and your **Polish Heritage** must accompany this application.
5. One or more current (must be dated in 2027) letters of recommendation are required.
6. If more space is needed, attach an additional page. Be sure to put your name at the top of any attachments.
7. All information must be sent to:
   Polish Junior League of Massachusetts, Inc. ATTN: Scholarship Chairperson, 40 May Street Chicopee, MA 01020 Or EMAIL'D to PJLOFMA@gmail.com
8. In mid/late-May, you will be notified ONLY if you have been chosen to receive a scholarship.