



**MORROW CIVIC WOMAN'S CLUB**  
**ANDREA LANE MEMORIAL SCHOLARSHIP APPLICATION**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Occupation \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Marital status \_\_\_\_\_ Number of dependents living in the home \_\_\_\_\_

Family income (Please include all sources of income)

Under \$20,000 \_\_\_\_\_ \$20,000-\$30,000 \_\_\_\_\_ \$30,000-\$40,000 \_\_\_\_\_ over \$40,000 \_\_\_\_\_

Other scholarships or grants you receive \_\_\_\_\_

Are you currently attending Clayton State University? Yes \_\_\_\_\_ No \_\_\_\_\_

— Date admitted \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Major field of study \_\_\_\_\_

What type of degree are you pursuing? \_\_\_\_\_

If you are not currently enrolled, have you been accepted for the upcoming semester? \_\_\_\_\_

List two persons associated with Clayton State University who could be contacted as references.

<b>Name</b>	<b>Email Address</b>	<b>Daytime Phone Number</b>
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**Requirements:**

Student must be accepted at Clayton State University.  
Student must be a female 25 years or older who is returning to school.  
Application and narrative must be received by May 1, 2026.

On the next page, please type a one-page statement on your educational goals and why continuing your education is important to you.

Save your application, and then submit it by email to  
[mcwcscholarship@gmail.com](mailto:mcwcscholarship@gmail.com)

