

2023

Jane M. Klausman

# WOMEN IN BUSINESS SCHOLARSHIP APPLICATION FORM



SEND APPLICATION AND DIRECT ANY QUESTIONS TO:

**Deadline:** June 1, 2023  
**Zonta Club/e-Club of:** Milwaukee, Wisconsin  
**District/Area:** 6  
**To find a club click:** [Club Locator](#)  
**Attention:** Deb Koller  
**Address:** 210 S. Water St. Unit 521  
**City/State:** Milwaukee, WI 53204  
**Province/Country:** USA  
**Telephone:** 262-930-0907  
**Email address:** zcscholarship@zontamilwaukee.org

Name: \_\_\_\_\_  
Last (Family) First Middle

Current mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Email address: \_\_\_\_\_ Telephone: \_\_\_\_\_

LinkedIn address: \_\_\_\_\_ Twitter handle: \_\_\_\_\_

Permanent mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Secondary email address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Birth date: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Country of citizenship: \_\_\_\_\_  
(mm/dd/yyyy) (city and country)

Name of university/college/institute currently attending: \_\_\_\_\_

Current year of study: \_\_\_\_\_

Department: \_\_\_\_\_ Major/field of study: \_\_\_\_\_

Plans for study under the JMK Women in Business Scholarship: \_\_\_\_\_

Degree sought: \_\_\_\_\_ Expected graduation date (month/year): \_\_\_\_\_

## Academic background

Applicants are required to send transcripts of grades or equivalent records from all universities, colleges or institutes attended. An explanation of the grading system must be included for each transcript. Please add your current degree sought and expected graduation date (month/year).

University/College	(Year) to (Year)	Major Field	Date Degree Received/Anticipated	Maximum GPA

## Scholarships, fellowships, honors received during the studies listed above

	Month/year

## Volunteer and Other Activities

(Please describe your volunteer, non-scholastic activities, memberships and cultural interests):

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## Employment history

From (month/year)	To (month/year)	Employer	Address	Type of work or position held

## Recommendations

Please give one of the attached recommendation forms to a faculty member in the major field of study and the other to an employer, volunteer supervisor or academic adviser.

Please list below those who will submit recommendations:

Name	Position	College/university/institute
1.		
2.		

## Declaration by applicant

I certify that all the information contained in my application form is accurate to the best of my knowledge and that I did not receive assistance in completing the essay portions of this application other than for translation into English for advancing to district/region and international levels. I understand that, at the option of the Zonta club sponsoring my application or the Zonta district/region, or Zonta International, I may be interviewed as a candidate for the Jane M. Klausman Women in Business Scholarship. I consent to the electronic or hard copy publication of material in my application by Zonta International.

- ☐ I confirm that I have not applied for the 2023 Zonta International Women in STEM Scholarship.
- ☐ I confirm that I have not applied to more than one Zonta district.
- ☐ I confirm that I am not a family member (ancestor, descendant, adoptee, sibling, niece or cousin and those of their spouse or co-habiting partner)) of a club member and individual with direct membership with Zonta International, and/or employee of Zonta International.

Signature (required)

Date

(Insert image of your signature or print, sign and scan this page.)

## Data protection

Zonta International and Zonta Foundation for Women take the security of your data seriously. We will never sell, trade or rent your personal information provided in this application to third parties. By submitting this application, you agree to the use of your data in accordance with the *Privacy Policy and Publicity Authorization Form* contained in the application documents (see page 8 of the application).

### How did you learn of the Jane M. Klausman Women in Business Scholarship?

Please check the appropriate items:

- ☐ Social media
  - ☐ Facebook
  - ☐ LinkedIn
  - ☐ Twitter
- ☐ Department/teacher
- ☐ Directory of grants at university financial aid office
- ☐ Directory of grants not at university (e.g., public libraries)
- ☐ Website (name): \_\_\_\_\_
- ☐ Zonta club member: \_\_\_\_\_
- ☐ Zonta Club of: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

### Applicant checklist

Please check all items included with the application:

- ☐ Completed application in English
- ☐ Official copies of all transcripts
- ☐ Recommendation letter cover sheets with dates and signatures
- ☐ Recommendations (2)
- ☐ Essay (not exceeding 500 words)
- ☐ Zonta International verification of current enrollment form (page 11) with official stamp of the college/university/institute
- ☐ Signatures

## Professional information and goals

(Please type in English.)

In 500 words or less, please describe your academic and professional goals, the relevance of your program to the business field, how you have demonstrated initiative, ambition and commitment to pursuing a career in business, and how the Zonta International Jane M. Klausman Women in Business Scholarship will assist you in reaching your goals. (Essays cannot exceed 500 words to be considered.) Please provide the word count at the end of your answer.



## Recommendation for Jane M. Klausman Women in Business Scholarship

June 1, 2023

Please return this form by: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature is required (Insert image of your signature or print, sign and scan this page.)

Applicant: \_\_\_\_\_  
Last (Family) Name First Middle

Recommendation from: \_\_\_\_\_  
Name Position/Title

\_\_\_\_\_  
College/university/institute/business/organization

The applicant above has applied for a Jane M. Klausman Women in Business Scholarship. The Jane M. Klausman Women in Business Scholarship Evaluation Committee greatly values and appreciates your opinion. Please discuss the applicant's accomplishments; current academic program or work experience; intellectual independence; capacity for analytical thinking; ability to organize and express ideas clearly; creativity; motivation; and potential for learning and succeeding in a business-related field. You may write your recommendation letter on letterhead of your choice; however, you must sign and submit this form with your letter of recommendation to the address below.

How long have you known the applicant? \_\_\_\_\_

Please rate the applicant with respect to your experience with other students/employees in this field/position:

☐  
Exceptional  
Top 5%

☐  
Very Good  
Next 10%

☐  
Good  
Next 15%

☐  
Average  
Next 30%

☐  
Below  
Average  
Last 40%

☐  
Insufficient opportunity to  
observe

\_\_\_\_\_  
Signature is required (Insert image of your signature or print, sign and scan this page.)

\_\_\_\_\_  
Date

Return form to Zonta Club of:	Milwaukee	Mailing Address:	Deb Koller 201 S. Water St. Unit 521
City:	Milwaukee	State/Province:	Wisconsin
Postal Code:	53204	Country:	USA
Fax:		Email Address:	zcscholarship@zontamilwaukee.org



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Applicant's Signature is required (Insert image of your signature or print, sign and scan this page.)

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College/university/institute/business/organization

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Please rate the applicant with respect to your experience with other students/employees in this field/position:

☐  
Exceptional  
Top 5%

☐  
Very Good  
Next 10%

☐  
Good  
Next 15%

☐  
Average  
Next 30%

☐  
Below  
Average  
Last 40%

☐  
Insufficient opportunity to  
observe

\_\_\_\_\_  
Signature is required (Insert image of your signature or print, sign and scan this page.)

\_\_\_\_\_  
Date

Return form to Zonta Club of:	Milwaukee	Mailing Address:	210 S. Water St. Unit 521
City:	Milwaukee	State/Province:	Wisconsin
Postal Code:	53204	Country:	USA
Fax:		Email Address:	zcscholarship@zontamilwaukee.org



# ZONTA INTERNATIONAL

## Verification of Current Enrollment for Jane M. Klausman Women in Business Scholarship

I certify that \_\_\_\_\_ is currently enrolled in  
(full name of student)

\_\_\_\_\_ in \_\_\_\_\_  
(year of degree program) (name of course/degree being studied)

at \_\_\_\_\_  
(name of college/university/institute)

\_\_\_\_\_  
(address college/university/institute)

\_\_\_\_\_  
(signature is required of college/university/institute official)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(Expected graduation date)

\_\_\_\_\_  
(official stamp of the college/university/institute)



## Privacy Policy and Publicity Authorization

### Zonta International Jane M. Klausman Women in Business Scholarship Program

Zonta International and the Zonta Foundation for Women are committed to honoring the privacy and wishes of all of our Jane M. Klausman Women in Business Scholarship recipients at all times. In order to do this, please read the following information carefully and indicate your agreement as appropriate.

1. Most data collected by Zonta International and the Zonta Foundation for Women is used only to help Zonta better serve its scholarship recipients. It is our general policy to collect and store only personal information that our recipients knowingly provide. Zonta does not sell, trade, or rent your personally identifying information to third parties. Except as described in paragraph two, we take reasonable measures not to disclose personally identifying information about you.

☐ I have read the above paragraph and agree to the Terms and Conditions therein.

2. From time to time, Zonta International and the Zonta Foundation for Women conducts various marketing activities to promote the Jane M. Klausman Women in Business Scholarship Program. In addition, to ensure Zonta's ability to fund the Scholarships, the Zonta Foundation for Women may from time to time provide information to donors to the Jane M. Klausman Women in Business Scholarship Fund about recipients of their donations. Zonta retains the right to use your name, photograph and biographical information to promote the Jane M. Klausman Women in Business Scholarships in various promotional materials, including the website.

☐ I have read the above paragraph and agree to the Terms and Conditions therein.

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Please print your name

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Signature is required (Insert image of your signature or print, sign and scan this page.)

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Date