

Soroptimist of Helena Violet Richardson Award Application

Instructions:

Deadline:

Completed applications and any supporting materials must be received by **December 1** at the address listed in Step 3. Soroptimists, Soroptimist employees and the immediate families of both are ineligible, as are previous Violet Richardson Award winners. Applications submitted directly to Soroptimist headquarters will not be considered.

Step 1: Determine if you are eligible

Eligible applicants are young women who:

- are currently between the ages of 14 and 17
- have demonstrated initiative in both identifying a problem and trying to solve it
- have had significant and noteworthy accomplishments as volunteers

Step 2: Complete the application

To fill out the form:

- Select the "Hand Tool," which appears as a small white hand.
- Move the "Hand Tool" and click on the area where you want to type.
- A cursor will appear and you can begin typing to personalize the application. (Note: You will not be able to change the type size. Please limit your answers to the space allotted.)
- Once all parts of the form are personalized, select "Save As" from the "File" menu and change the file name (for example, "VRAemailappLG.pdf," where "LG" are your initials). Click "Save."

Step 3: Email your application

Send your application with any supporting materials to:

Soroptimist Club Name: SI of Helena

Club Contact Person: Cindy Zimmerman

Email Address: cindyzimm5@yahoo.com

Address: PO Box 1216

City/State/Zip: Helena, MT 59624

Phone: 406-461-8342

All inquiries regarding this application should be made to the club contact person listed above.

Soroptimist Violet Richardson Award Application

General Information

Name

(Last)

(First)

(Middle Initial)

Date of Birth

Email Address

Address

(Number and Street)

City

Province/State

Postal Code

Country

Phone

Name of the organization where you volunteer

Phone number for volunteer organization

Essay

On the next page, write an essay, up to 750 words. Tell us where you volunteer and why. Describe the goals of the organization and its impact on the problem(s) it addresses. What is your role in the organization? What have you accomplished as a volunteer?

Additional Materials (Optional)

Please feel free to submit any supporting materials that you think we should see (for example, newspaper clippings, photographs, etc.). Additional materials are optional. Make sure that your name and phone number are on all additional materials.

Agreement

- I certify that all information provided in this application is complete and accurate to the best of my knowledge. I will notify the designated club to which I have submitted this application if there are any changes.
- I understand this award is taxable in the United States. Recipients in other countries should check their local tax laws.
- I certify that this is the only application I have made this year for a Soroptimist Violet Richardson Award from this or any other Soroptimist club.
- I understand that my application and supporting materials become the property of Soroptimist International of the Americas (SIA) upon submission, and that SIA shall have sole discretion in using these materials for the purpose of publicizing the Violet Richardson Award program.

By typing your name below you adhere to the above requirements.

Signature of Applicant

Date

Signature of Parent or Guardian

Essay

Please type your essay below.