



## Cary Woman's Club

### Scholarship Application for 2026 High School Seniors

**Personal Information:** Please print or type.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

You must be a resident of Wake County and reside in Cary, Apex or Morrisville.

U.S. Citizen: YES \_\_\_\_\_ NO \_\_\_\_\_ *If not a US citizen, Permanent Resident: YES \_\_\_\_\_ NO \_\_\_\_\_*

Please submit proof of permanent resident status if you are not a U.S. citizen.

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

High School Attending: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Weighted GPA: \_\_\_\_\_ Unweighted GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_ of \_\_\_\_\_

SAT Scores: Math \_\_\_\_\_ Writing \_\_\_\_\_ Critical Reading \_\_\_\_\_

ACT Scores: Math \_\_\_\_\_ Science \_\_\_\_\_ Reading \_\_\_\_\_ English \_\_\_\_\_ Writing \_\_\_\_\_

NOTE: SAT / ACT Scores are optional

\_\_\_\_\_  
Name or Father / Guardian Occupation Employer

\_\_\_\_\_  
Name of Mother / Guardian Occupation Employer

Number of children in household \_\_\_\_\_ Number of siblings, including yourself, attending college 2026-2027 \_\_\_\_\_

#### Finances:

Total 2025 Adjusted Gross Income (AGI) for household: \_\_\_\_\_

Total 2025 Student Income: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Student Employer: \_\_\_\_\_

**Educational Plan:**

How do you plan to pay for your college education?

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Applicants must plan to attend an accredited four-year public college or university in the state of North Carolina. Please list the institutions to which you are applying in order of your preference OR the institution where you have been accepted and plan to attend.

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**Personal Experiences:**

List high school activities / experiences in the order of importance to you.

Activity	Hours	Dates	Position(s) Held
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Aside from high school activities, list extracurricular activities, community service, volunteer participation and work experience.

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List awards or honors received during high school years.

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NOTE: If more space is needed, please attach additional pages to the application.

**Short Essay:** Please attach an essay stating the following:

- Why you desire to continue your education
- What are your future educational plans
- Why financial assistance is needed
- You may also provide additional information that you would like the scholarship committee to know about you or your family

**Completion of Application:** Check your application to make sure the following are included:

- \* Proof of permanent residency if not a US citizen.
- \* A copy of an official high school transcript through the first half of senior year, grade point average (weighted and unweighted), class rank with number of students in class and a copy of ACT/SAT scores.  
NOTE: SAT/ACT scores are optional.
- \* A complete copy of the Free Application for Federal Student Aid (FAFSA), showing income and number of dependents.
- \* A letter of recommendation from a school counselor, principal, teacher, coach, or business / professional person.
- \* Essay

Email a pdf or word copy to: [kmfiumara@gmail.com](mailto:kmfiumara@gmail.com)

NOTE: Application must be emailed no later than midnight on Wednesday, April 1, 2026.

Scholarship contact for questions: Karen Fiumara at 919-368-6085 (phone or text) or  
Email: [kmfiumara@gmail.com](mailto:kmfiumara@gmail.com)

Thank you for your participation in this scholarship program.