



Instructions

Deadline

Applications for awards are accepted between July 1 and December 1 of each year. Award recipients are notified in late December. Not all applicants will be selected for awards. Applications can only be submitted to one club. Your application will be reviewed by a panel of judges, but all information will remain confidential and will not be shared without your prior permission.

Awards

Live Your Dream Awards issued by Soroptimist International of Victoria Westshore are \$1,500 each. Awards are presented at our gala fundraising event, Flavour of Chocolate held yearly in the Spring. Winners will be invited to attend Flavour of Chocolate and transportation will be provided to the venue. Find out more at <http://sivw.ca/foc>

Step 1: Determine if you are eligible

You are eligible if you are a woman who:

- Provides the primary financial support for yourself and your dependents. Dependents can include children, spouse, partner, siblings and/or parents.
- Has financial need.
- Is enrolled in or has been accepted to a vocational/skills training program or an undergraduate degree program.
- Is motivated to achieve your education and career goals.
- Resides in the Capital Regional District.
- Has not previously been the recipient of a Soroptimist Women's Opportunity or Live Your Dream Award.
- Does not have a graduate degree.
- Is not a Soroptimist member, an employee of Soroptimist International of the Americas or immediate family of either.

Step 2: Tell us about yourself

Fill out the award application telling us about yourself. Your information will be kept confidential and shared only with the evaluators unless you give us written permission to share your story to publicize the program.

We STRONGLY recommend you write your answers in a separate document then cut and paste your answers into our online form. This way your original work will not be lost if your session times out.

Please limit your answers to the space allotted.

Step 3: Ask people to tell us about you

You will need two different people—who are not related to you—to fill out reference forms. It is recommended that you request references from people who know you from an educational or work setting. Please email the following link to the reference form (<http://sivw.ca/lyd/lyd-reference>) to your references and request they submit the form online when completed. Only two references will be accepted. Please use the form and do not submit other forms of references (such as a letter). They will not be considered as part of the application.

Step 4: Submit your application

There are two ways for you to fill out an application. The first option is by completing this printed application, scan it and email it to Soroptimist International of Victoria Westshore (lyd@sivw.ca). The second option is to use this completed application as a guide for filling out the online application. The online application (<http://sivw.ca/lyd/lyd-application>) does not save and must be completed in one sitting.

Applications are accepted between July 1 and December 1.

Questions?

Contact Soroptimist International of Victoria Westshore at lyd@sivw.ca

Ready to Apply?

Print the following form and take your time in answering the questions as thoroughly and accurately as possible. When you have finished answering the questions, you can either scan the application and email it to us (lyd@sivw.ca) or you can use the form as a reference guide to filling out the application online (<http://sivw.ca/lyd/lyd-application>)

Ready, Set, Live Your Dream!!

Begin your application now

Part 1. Basic Information

Name (first, middle initial, last): _____

Address (number and street address): _____

City: _____ Province: _____ Postal Code _____

Telephone: _____ Email: _____

Date of Birth: _____ Marital Status: _____

Highest level of education achieved: _____ Date Completed: _____

Number of dependents you support (NOT including yourself): _____

How are they related to you (child, spouse, parents, etc.)?: _____

Ages (if they are children): _____

Part II. What are your educational & career goals?

A. What's the name of the school or training program you are attending or have been accepted to?

B. What are you studying? (example: Bachelor of Science nursing degree or computer science certificate)

C. When will you complete your studies (month and year)?

D. Are you working while you are getting your education? (check one) YES _____ NO _____

If yes, how many hours per week?

E. In 300 words or less, please tell us about your career goals, and give specifics about how your education and training supports these goals.

Part III. Financial Information

Live Your Dream Award recipients are chosen in part based on financial need. Please share information about your annual income and expenses. Please be as exact as you can.

A. INCOME:

Please list your ANNUAL household income and savings (from the money you have left after taxes) in the chart below.

Employment:	\$ _____ per year	Government Assistance:	\$ _____ per year
Savings:	\$ _____ per year	Loans:	\$ _____ per year
Child Support:	\$ _____ per year	Scholarships:	\$ _____ per year
Alimony:	\$ _____ per year		

Please list any additional income, including income other household members receive.

Source: _____ \$ _____ per year
Source: _____ \$ _____ per year
Source: _____ \$ _____ per year

TOTAL ANNUAL INCOME: _____

B. EXPENSES:

Please list your ANNUAL household expenses in the chart below:

Housing:	\$ _____ per year	Utilities:	\$ _____ per year
Food:	\$ _____ per year	Medical:	\$ _____ per year
Child Care:	\$ _____ per year	Transportation:	\$ _____ per year
Tuition:	\$ _____ per year	Books:	\$ _____ per year

Please list any additional expenses, including in the chart below.

Expense: _____ \$ _____ per year
Expense: _____ \$ _____ per year
Expense: _____ \$ _____ per year

TOTAL ANNUAL EXPENSES: _____

Part IV. Tell us more about yourself

The Live Your Dream Award is all about helping women who have faced economic and personal hardships to live their dreams. Since 1972, the award has provided tens of thousands of women with cash grants to help them achieve their educational and career goals. The program helps women build a better life for themselves and their dependents. Do you think this award could help you live your dream? In 750 words or less, tell us about the challenges you've faced and how you think this award could help you to live your dream.

Part V. Agreement

Please read the following information carefully. When you sign your name below, you are agreeing to what you have read.

- I certify that all the information provided in this application is complete and accurate to the best of my knowledge. I will notify Soroptimist International of Victoria Westshore if there are any changes.
- I certify that this is the only application I have made—in any format or to any address—this year for a Soroptimist Live Your Dream Award.
- I understand that my application may be submitted electronically for evaluation.
- I understand that my application becomes the property of Soroptimist International of the Americas. The application will be considered confidential unless the applicant grants Soroptimist written permission to release personal information for the purpose of publicizing the award.

By signing your name below, you adhere to the above requirements.

Signature of applicant

Date

How did you hear about the Soroptimist Live Your Dream Award

- A local Soroptimist club
- A friend, relative, or co-worker
- A career counsellor or advisor at my school
- Social media
- A flyer posted in my community
- Internet search
- Searchable database of scholarships:
- Other _____

Thank you for applying for the
Live Your Dream Award.

Congratulations on all you have achieved so far!