2027

ZONTA WOMEN IN STEM AWARD

ZONTA INTERNATIONAL

APPLICATION FORM

SEND APPLICATION AND DIRECT ANY QUESTIONS TO:

Application Deadline: (Deadline set by club applicant is applying to.)	**Contact local Zonta club for deadline.**
Zonta Club/e-Club of:	Bunbury (Application deadline: 1st January 2027)
District/Area:	District 23 / Area 3
To find a club click:	Club Locator
Attention:	Coordinator, Women in STEM Award
Address:	PO Box 1395
City/State:	BUNBURY, Western Australia
Province/Country:	Australia
Telephone:	
Email address:	zontabunbury@yahoo.com.au

Name: _____
Last (Family) First Middle

Current mailing address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

Email address: _____ Telephone: _____

LinkedIn address: _____

Permanent mailing address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

Secondary email address: _____ Telephone: _____

Birth date: _____ Birthplace: _____ Country of citizenship: _____
(date/month/year) (city and country)

Name of college/university/institute currently attending (if applicable): _____

Current year of study (if applicable): _____ Expected graduation date (if applicable provide month/year): _____

Department/field of study (if applicable): _____

Degree sought (if applicable): _____

Name and Address of Employer (if applicable): _____

Education/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 degree obtained or current degree sought, if applicable, and expected graduation date (month/year). Do not upload unofficial transcripts as they will not be accepted.

In the tables below, please list the institutions you have attended:

University/college/institute/online	Degree Received/Sought with Major Field(s)	Dates Attended	Date Degree Received/ Anticipated (Month/Year)

Employment history in STEM field (if applicable):

(If you started your own company, please include that information here.)

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

Scholarships, fellowships, honors received:

Awarding Body	Award/Scholarship/Honor	Basis for Award (e.g. academic merit, leadership, service, etc)	Date From - To

Volunteer and/or other activities

In 200-300 words or less, please describe any volunteer, non-scholastic activities, memberships and cultural interests.

Professional information and goals

In 500 words or less, please describe your significant achievements, research, discoveries, innovations and/or contributions to advancing knowledge or practice in a STEM field, whether in an academic or professional setting.

Please highlight the impact and significance of your work. This may include achievements or contributions that have advanced your field, benefited your workplace, organization or community, addressed a societal challenge, contributed to scientific or technological innovation, or supported your own professional or academic advancement. Applicants should provide specific examples of accomplishments, outcomes or other evidence that demonstrate the success and potential impact of their work.

Please also explain how you would use the Zonta Women in STEM Award to further your goals and advance your work. Describe the specific opportunities, activities, education, research, equipment, professional development or other needs the award would support and, where applicable, how this investment could benefit your field, organization, community or others beyond yourself.

(Essays cannot exceed 500 words to be considered.) Please provide the word count at the end of your response.

Recommendations

Please use the following fields to name and send a recommendation letter request to a faculty member in the major field of study (if applicable) and/or to a supervisor, employer, volunteer supervisor, or academic advisor. These recommendations are confidential, and you will not be able to view the completed responses. It is the responsibility of the applicant to make sure these recommendations have been turned in by the Zonta club's deadline.

Please list below those referees who will submit recommendations:

Name	Position	Title	College/university/institute/ employer
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 and international levels. I understand that, at the option of the Zonta club sponsoring my application or the Zonta district or Zonta International, I may be interviewed as a candidate for the Zonta Women in STEM Award. I consent to the electronic or hard copy publication of material in my application by Zonta International.

- ☐ I confirm that I have not applied to more than one Zonta district.
- ☐ I confirm that I am not a club member or individual with direct membership with Zonta International or employee of Zonta International and Zonta Foundation for Women (excluding recipients of a Zonta fellowship or award who are currently within their complimentary one-year supporting membership from Zonta International).
- ☐ I confirm that I am not a previous international fellowship or scholarship recipient.

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).

FINAL Checklists

Checklist to be completed by applicant:

Official detailed transcripts (if applicable)	☐
Translated transcripts in English from all universities/colleges/institutions attended (if applicable)	☐
Recommendations (2)	☐
Essay (not exceeding 500 words)	☐
Verification of Current Enrollment Form (if applicable)	☐
Letter from employer verifying employment (if applicable)	☐
Signatures	☐

How did you learn of the Zonta Women in STEM Award?

Social media: ▪ LinkedIn ▪ Facebook ▪ Instagram	☐ ☐ ☐
Department/teacher	☐
Directory of grants at university financial aid office	☐
Directory of grants not at university (e.g., public libraries)	☐
Website (name):	☐
Previous recipient (name):	☐
Zonta club name:	☐

ZONTA INTERNATIONAL

Recommendation for the Zonta Women in STEM Award

Please return this form by: 1st January 2027

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/employer

The applicant above has applied for a Zonta Women in STEM Award. Zonta International greatly values and appreciates your opinion. Please discuss the applicant's accomplishments; current academic program and/or work experience; intellectual independence; capacity for analytical thinking; ability to organize and express ideas clearly; creativity; motivation; and potential for advancing knowledge and innovation in a STEM field. You may write your recommendation letter on letterhead of your choice, but you must sign and submit the letter with this form.

How well do you know 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%	Below Average Last 40%

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

Return form to Zonta Club of:		**Mailing Address:**	
City:		**State/Province:**	
Postal Code:		**Country:**	
Fax:		**Email Address:**	

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City:		**State/Province:**	
Postal Code:		**Country:**	
Fax:		**Email Address:**	

ZONTA
INTERNATIONAL

Verification of Current Enrollment Form for Zonta Women in STEM Award

I certify that _____ is currently enrolled in
(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 of college/university/institute official)

_____
(**official stamp of the college/university/institute**)

Zonta Women in STEM Award
Program Privacy Policy and Publicity Authorization

Zonta International and the Zonta Foundation for Women are committed to honoring the privacy and wishes of all our Zonta Women in STEM Award 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 Zonta Women in STEM Award. In addition, to ensure Zonta's ability to fund the awards, the Zonta Foundation for Women may from time to time provide information to donors about recipients of their donations. Zonta retains the right to use your name, photograph and biographical information to promote the Zonta Women in STEM Award in various promotional materials, including the website.

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

_____

Please print your name

_____ _____

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