

DEMOCRATIC WOMEN OF ERIE COUNTY DOROTHY DEERING MEMORIAL SCHOLARSHIP 2023 SCHOLARSHIP APPLICANT COVER PAGE

NAME:		AGE:
ADDRESS:		-
CITY:	ST: OHIO	ZIPCODE:
TELEPHONE NUMBER:	EMAIL:	
CURRENT SCHOOL/COLLEGE:		
SCHOOL/COLLEGE ADDRESS:		_
CITY:	ST:	ZIPCODE:
you have been, or are currently, invol	ved in: (Feel free	to list your activities/services in bulleted
Please complete the cover page and s Charlene Adams, 1518 Pearl Street, Sa	-	-
The essay must be postmarked no lat delivery.	er than Friday, Ma	arch 24, 2023. We allow 10 days for

Yvette Rankins: Sgtyar@aol.com

Any questions, please contact: Charlene Adams: Charlenea56@gmail.com