



Empower. Encourage. Educate

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AUDREY BROOKS, CEO/FOUNDER

Application for the MKC Scholarship

Complete this form in its entirety and return it as an attachment to the following email address:
info@wempowering.org.

Incomplete forms and/or non-specific information will not be considered for scholarship award.

All eligibility requirements must be confirmed before this form is considered for the MKC Scholarship

Applicants must be a resident of the United States.

Name: _____ Phone: (____) ____ - ____

Address: _____ City: _____

State: _____ Zip/Postal Code: _____

Email: _____

I am enrolled or accepted at: _____

City: _____ State: _____

Start date of the term or semester I would use this scholarship: ____ / ____ / ____ (mm/dd/yyyy)

I will complete the educational program that will give me the marketable skill I am seeking
on _____ (month/year)

My educational goal is (degree and field of study)

. In 500 to 700 words, specifically answer the following:

1. Why did you decide to continue your education at this time?
2. How will your study contribute to your immediate or long-term career plans?
3. Explain how (your major) contributes to society.
4. Describe your most meaningful achievements and how they relate to your field of study and your future goals.
5. State your employment goals upon the completion of the educational program.