

Zonta D14 STEM Award

2024 Application

Zonta D14 STEM Award

General Information

Women are still largely underrepresented in technology and other STEM (Science Technology Engineering Mathematics) fields. To create a world in which men and women have equal opportunities, women need to have an active role in technology and technological developments. Zonta District 14 is pleased to offer its Zonta D14 STEM Award to encourage women to pursue education, career opportunities and leadership roles in technology.

The Award

The Zonta D14 STEM Award is awarded to women of any age, pursuing a degree in STEM. Zonta District 14 (D14) offers an Award in the amount of 2000€.

Who is Eligible?

Women of any age and nationality, pursuing a degree in STEM at an accredited university/college/institute, who demonstrate outstanding academic record during their academic studies in STEM, are eligible to apply.

Students must be enrolled in at least the second year of an undergraduate program through the final year of a Master's program at the time the application is submitted to the local Zonta club. Applicants must still be in school at the time the awards are disbursed and must not graduate before December 2024.

Golden Z club members may apply.

Classified members and employees of Zonta International and Zonta International Foundation, and their family members, are not eligible to apply.

How Do I Apply?

Complete an official application in English. Please note that only typed applications will be accepted and considered. All non-English documents must be translated into English. The following documents are to be submitted in the application package. Applications can be downloaded from the Zonta D14 website, (https://zonta-district14.org/ and must include:

- 1. Verification of Current Enrollment form or official statement from the university/college registrar.
- 2. List and include official detailed transcripts of grades or equivalent records from all universities, colleges, or institutions attended, including undergraduate institutions and degrees received. In programs where graduate transcripts are not provided as a matter of institutional policy, please provide a statement of that policy from the registrar or other school official. (Important note: please do not upload electronic transcripts, or links to electronic copies directly from the university, as the documents may have expiration dates to review and/or request for a password to access the file. Please scan official transcripts in color and save as a PDF and upload the saved copy. Please ensure all transcripts are legible.) Do not upload unofficial transcripts as they will not be accepted.
- 3. Two confidential recommendations from a faculty member in the major field of study. (Classified members and employees of Zonta International and Zonta Foundation for Women are not eligible to write recommendation letters for applicants.)
- 4. List scholarships and honors received, if any.
- 5. All non-English documents must be translated into English to be considered.
- 6. Information other than official transcripts and recommendations must be limited to the space provided; attachments, articles, pamphlets, books, curriculum vitae or other publications are not requested and will not be considered.

Application Process

The Zonta D14 STEM Award program operates at the club and district level of Zonta district 14. Applications selected by Zonta clubs are sent to the respective Zonta district 14 governor. The Zonta D14 STEM Award Committee selects tree recipients from the applicants.

Timetable

Applications received by Zonta clubs
Club recipient is selected, and application is received by governor representative
Official announcement of district recipients

(club decide)
15 August 2024
mid-Oktober 2024

DISTRICT 14 WOMEN IN STEM AWARD



APPLICATION FORM

SEND APPLICATION AND DIRECT ANY QUESTIONS TO:

Deadline:				
Zonta Club/e-Club of:				
District/Area:				
To find a club click:	Club Locator			
Attention:				
Address:				
City/State:				
Province/Country:				
Telephone: Email address:				
Name: Last (Family)	First		Middle	
			Middle	
Permanent mailing address:				
City:	State:	Postal Code:	Country:	
Email address:			Telephone:	
LinkedIn address:		Twit	ter handle:	
Address during academic yea	r (if different):			
City:	State:	Postal Code:	Country:	
Secondary email address: _		Te	lephone:	
Birth date:	Birthplace:	Count	ry of citizenship:	
(mm/dd/yyyy)	(cit	y and country)		
Name of university/college/i	nstitute currently attend	ding:		
Current year of study:				
Department:		Major/field of study:	:	
Plans for study under the Wo	omen in STEM Award:			
Degree sought:				
Expected graduation date (in	clude month/year):			

Academic background

Your application must include official detailed transcripts of grades or equivalent records from all universities, colleges, or institutions attended, including undergraduate institutions. An explanation of the grading system must be included for each transcript. Please add your current degree sought and expected graduation date (month/year). Please ensure all transcripts are legible.) Do not upload unofficial transcripts as they will not be accepted.

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

Univers	ity/College	(Year) to (Year)	Major Field	Degree	Date Degree Received/ Anticipated
n <mark>ployme</mark> ı From	nt history	Name of Employe	r A	ddress	Type of work or position held
month/year)	(month/year)	Traine of Employe		udi ess	Type of Work of position field
cholarshir	s. fellowship	s. honors receive	ed (please give dates):		
			(1-1-1-7)		(Year) to (Year)
ther activ	vities				
		non-scholastic activiti	es, memberships and cultu	ıral interests):	
	- / ,				
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Recommendations

Please use the following fields to name and send a recommendation letter request to one faculty member in the major field of study and one to an organization supervisor, employer, volunteer supervisor or academic adviser. Note that a faculty member in the major field of study must be one of the referees. 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/
			company
1.			
2.			

Declaration by Applicant

Website (name):

Zonta club name:

Previous recipient (name):

I certify that all of 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 level. I understand that, at the option of the Zonta club sponsoring my application or the Zonta district, I may be interviewed as a candidate for the Women in STEM Award. I consent to the electronic or hard copy publication of material in my application by Zonta District 14.

		tor, c	Zonta Club. descendant, adoptee, sibling, niece or cousin and those individual with direct membership with Zonta Internat		eir		
Sig	gnature (required)		Date				
	(Insert image of your signature of	r prin	t, sign and scan this page.)				
Zonta provid accord page 8	ded in this application to third parties. By submit	ting t	Ve will never sell, trade or rent your personal informat this application, you agree to the use of your data in on Form contained in the application documents (see Checklist to be completed by applicant	ion			
Social	media		Official detailed transcripts (from all universities/colleges/institutions attended)				
Depai	rtment/teacher		Translated transcripts in English (from all universities/colleges/institutions attended)				
Direct	tory of grants at university financial aid office		Recommendations (2)				
	rectory of grants not at university (e.g., public raries) Recommendation Waiver Form						

Signatures

Other:

Verification of Current Enrollment Form

Professional information and goals

(Please <u>type</u> essay in English.)

n 500 words or less, please desc lemonstrated initiative, ambition STEM Award will assist you in rea vord count at the end of your ar	and commitment to pursuaching your goals. (Essays o	uing a career in STEM, an	d how the Zonta District	: 14 Women in
void count at the end of your ar	swei.			



Zonta District 14 Recommendation for the Women in STEM Award

Please return	this form by:					
		Applicant's signature	e is required (Insert in	mage of your signatu	re or print, sign and scan this page.)	
Applicant:	Last (Family) Name		Fir	st	Middle	
Recommend						
		Nan	ne		Position/Title	
		College/un	iversity/institute/	employer		
experience; i creativity; mo recommendat	ntellectual independe	ence; capacity for tial for learning an ad of your choice, bu	analytical think nd succeeding i	ng; ability to o n a STEM-relat	cademic program and/or work organize and express ideas clear red program. You may write you etter with this form.	•
Please rate t	he applicant with resp	ect to your experier	nce with other st	udents/employe	es in this field/position:	
Exceptiona Top 5%	l Very Good Next 10%	Good Next 15%	Average Next 30%	Below Average Last 40%	Insufficient opportunity to observe	
Referee's sign	ature is required (Insert	image of your signatu	re or print, sign an	d scan this page	Date	
Return form to Zonta Club of:			Mailing Address:			
City:			State/Province:			\neg
Postal Code:			Country:			
Fax:			Email Address:			



Zonta District 14 Recommendation for the Women in STEM Award

Please return th	is form by:				
		Applicant's signatur	e is required (Insert	image of your sign	ature or print, sign and scan this page.)
Applicant:	Last (Family) Name		First		Middle
Recommendation					
		Name			Position/Title
		College/	university/institu	te/emplover	
		College	aniversity/institu	te/ employer	
appreciates you experience; into creativity; moti	ur opinion. Please ellectual independen vation; and potentia	discuss the ap ce; capacity for al for learning	plicant's accom r analytical thi and succeedin	nplishments; con nking; ability g in a STEM	ard. Zonta District 14 greatly values ar urrent academic program and/or wo to organize and express ideas clearl -related program. You may write yo e letter with this form.
How well do yo	ou know the applicant?	?			
Please rate the	applicant with respec	t to your experie	nce with other s	students/emplo	yees in this field/position:
Exceptional Top 5%	Very Good Next 10%	Good Next 15%	Average Next 30%	Below Average Last 40%	Insufficient opportunity to observe
Referee's signature	is required (Insert image of	your signature or pr	int, sign and scan th	is page.)	Date
Return form to Zonta Club of:			Mailing Address:		
City:			State/Province:		
Postal Code:			Country:		
Fax:			Email Address:		



Verification of Current Enrollment Form Women in STEM Award

I certify that		is currently in			
·	(Name)	<u> </u>			
	at				
(department)		(university/college)			
and is enrolled in a		Degree.			
(Signature of registrar)	(Date)	(Expected graduation date)			
(Official University/College Stamp)					



Zonta District 14 Women in STEM Award Program

Privacy Policy and Publicity Authorization

Zonta District 14 is committed to honoring the privacy and wishes of all of our 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 District 14 is used only to help Zonta better serve its Award recipients. It is our general policy to collect and store only personal information knowingly provide. Zonta does not sell, trade, or rent your personally identifying information as described in paragraph two, we take reasonable measures not to disclose personally identifyou.	tion to third parties. Except
	I have read the above paragraph and agree to the Terms and Conditions therein.	
2.	From time to time, Zonta District 14 conducts various marketing activities to promote the Award Program. Zonta District 14 retains the right to use your name, photograph and biog to promote the Women in STEM Award in various promotional materials, including the we	graphical information
	☐ I have read the above paragraph and agree to the Terms and Conditions therein.	
Applic	ant's signature is required (Insert image of your signature or print, sign and scan this page.)	Date
Please	print your name	_