

**Northwestern Region, Soroptimist International of the Americas**  
**Professional-Technical Award**  
**Club Application**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code \_\_\_\_\_ Phone: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Name of Registrar: \_\_\_\_\_ Phone: \_\_\_\_\_

What are your education goals?

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How will you use this cash award?

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Please submit this form along with one character and one personal reference to the participating Soroptimist club.

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