

Soroptimist Violet Richardson Award Application

It's What You Do That Counts!

Are you a young woman between the ages of 14 and 18 who volunteers in your community or school? Who sees challenges instead of obstacles? Hope instead of despair? If you are a young woman who believes in the power of volunteer action, then you may be eligible to win a Soroptimist Violet Richardson Award.

The Violet Richardson Award recognizes young women who make the community and world a better place through volunteer efforts such as: fighting drugs, crime and violence; cleaning up the environment; and working to end discrimination and poverty. Volunteer actions that benefit women or girls are of particular interest.

Soroptimist is an organization of women whose members volunteer in their communities, often working on the same problems that you do. Although we realize that volunteering is its own reward, we also know it feels good to be recognized for your actions. And that's why we sponsor this award.

The Soroptimist Violet Richardson Award Program recognizes and rewards YOUR VOLUNTEER SERVICES

If you think you would make a good Violet Richardson Award candidate, please complete this application, and tell us about your volunteer actions. ***Good luck! And, even if you don't win a Violet Richardson Award, we applaud your efforts to make your community and the world a better place .***

Soroptimist Violet Richardson Award Application Instructions:

APPLICATION SUBMISSION DEADLINE: 15 March 2025

Completed applications and any supporting materials must be received by the deadline date.

NOTE: Soroptimists, Soroptimist employees and the immediate families of both are ineligible, as are previous Violet Richardson Award winners. Applications submitted directly to Soroptimist headquarters will not be considered.

Step 1: Determine your eligibility. Eligible applicants are young women who:

- are currently between the ages of 14 and 18
- have demonstrated initiative in both identifying a problem and trying to solve it
- have had significant and noteworthy accomplishments as volunteers

Step 2: Complete the application. ***Save File as First Last Name_VR Application.pdf***

Step 3: Application submission **OPTIONS:**

- Email completed application. Include supporting documentation as email attachments.
Email to: Pat Wedenko, pwedenko@aol.com or scholarships@soroptimisthdg.org
- Print completed application. Mail your application with any supporting materials to:

Soroptimist International of Havre de Grace
Attn: Violet Richardson Committee
P.O. Box 848 Havre de Grace, Maryland 21078

- Questions? Contact Pat Wedenko, 443-987-8592.

Soroptimist Violet Richardson Award Application

Name:

Date of Birth

Email:

Address:

City:

State:

Zipcode:

Home Phone:

Cell Phone:

Name(s) of Organization where you have volunteered:

Organization:

Phone:

Contact Name:

Organization:

Phone:

Contact Name:

SUBMIT YOUR ESSAY:

In the space provided on page 2, write your essay. Up to 750 words.

- Tell us where you volunteer and why.
 - Describe the goals of the organization and its impact on the problem(s) it addresses.
 - What is your role in the organization?
 - What have you accomplished as a volunteer?
- ❖ Submit Additional Materials (Optional) Please feel free to submit any supporting materials that you think we should see (for example, newspaper clippings, photographs, etc.).
Send copies only. All additional materials submitted must include your name and phone number.

Provide Your Essay Here:

Agreement:

- I certify that all information provided in this application is complete and accurate to the best of my knowledge. I will notify the Soroptimist International of Havre de Grace if there are any changes.
- I understand this award is taxable in the United States.
- I certify that this is the only application I have made this year for a Soroptimist International of Havre de Grace Violet Richardson Award.
- I understand that my application and supporting materials become the property of Soroptimist International of Havre de Grace, Maryland 21078 upon submission, and that SI HDG shall have sole discretion in using these materials for the purpose of publicizing the Violet Richardson Award program.

By typing your name below, you adhere to the above requirements.

Signature of Applicant:

Date:

Signature of Parent or Guardian:

Date:

By signing this application, you give permission for your daughter to apply for the Violet Richardson Award.

Soroptimist Media Consent Form

I hereby grant permission to Soroptimist International of the Americas (SIA)/Founder Region and/or its clubs to use my name, likeness and/or voice for all publicity purposes and in any media format. Media formats include but are not limited to: newspapers, magazines, television, radio, film, photographs, social media and the Internet.

Soroptimist International of Havre de Grace, Maryland 21078 shall retain all rights to submitted materials.

Name: (Print)

If applicant is under 18 years of age:

Parent/Guardian Name (print)

Parent/Guardian Signature:

Date Signed:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Email:

Witness Signature:

Date Signed:

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