Graduate Leadership Scholarship Program

The Women's Transportation Seminar (WTS) created this scholarship to encourage women to pursue career paths in transportation. The scholarship is awarded to women pursuing graduate studies in transportation or a related field.

The minimum criteria for the graduate scholarship selection are as follows:

a. Open to women
b. GPA of 3.0 or higher
c. Currently enrolled in a graduate degree program in a transportation-related field, such as transportation planning or engineering, security planning, business management, finance, or logistics, with a focus on public policy
d. Plans to pursue a career in a transportation-related field
e. Demonstrated interest in addressing transportation studies issues
f. Submission of a personal statement of 500 words or less highlighting the candidate's interest in transportation-related fields, relevant experiences, and interests, and how this award will contribute to the candidate's ability to make a meaningful contribution in the transportation arena

The scholarships are competitive and based on the applicant's specific transportation study goals, academic records, and transportation-related activities or job skills. Minority candidates are encouraged to apply.

Please return the completed application form and required documents to:

Layla Krens WTS Central Florida Chapter Scholarship Chair Phone: 407.402.2424 Email: layla.krens@hdrinc.com	*or*	Beneetta Mary Jose WTS Central Florida Chapter Scholarship Co-Chair Phone: 689.206.0945 Email: b.jose@fehrandpeers.com
Website: www.wtsinternational.org/chapters/central-florida		

APPLICATION DEADLINE: April 4, 2025

Note: Application must be postmarked or e-mail time-stamped no later than April 4, 2025.

Women's Transportation Seminar

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**2025 Graduate Leadership Scholarship
Application Form**

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TYPE OR PRINT CLEARLY IN BLACK INK

**I.	Personal Information**

Name_____
             Last   First   Middle

Current Address_____
                        Street

             _____   (___)_____
                  City   State   Zip   Contact Phone

E-mail address_____

Permanent Address_____
                          Street

             _____   (___)_____
                  City   State   Zip   Telephone

How did you find out about the WTS Scholarship Program? (Please be specific in names and organizations)_____

_____

Secondary Contact:

Name_____
             Last   First   Contact Phone

**II.	Educational Background**

Current College/University _____ City_____, State____

Expected Date of Graduation_____ Degree to be Received_____

Area of Concentration_____

Grade Point Average_____ (Minimum GPA of 3.0 required. Attach an official copy of your transcript along with the application.)

Previous Colleges/Universities Attended, Date Degree Earned and GPA:

_____

_____

Professional or School Affiliations (List any school, professional, or community activities you have participated in. Include offices held and awards received. Attach additional sheets, if necessary.)

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III.   Employment History

Work Experience (List full-time, part-time, co-op, and summer employment. Briefly describe duties and responsibilities. Attach additional sheets, if necessary.)

Name of employer	Job title or type of work	Dates worked (mm/yyyy)	
		From	To

_____

_____

_____

IV.   **Recommendation:** Two letters of recommendation by a professor or job supervisor must accompany your application.

V.   **Personal Statement:** A statement about your career goals after graduation and why you think that you should receive the scholarship award. The statement should highlight your interest in a transportation-related field, relevant experiences and interests, and how this award will contribute to your ability to make a meaningful contribution in the transportation arena. It should not exceed 500 words. Please attach it to the application form.

VI.   **Proof of Enrollment:** Attach a copy of your tuition receipt or current registration card.

VII.   **Official School Transcript:** An official school transcript must be submitted by your school directly to the Scholarship Chair or Co-chair. Copies or original transcripts sent from students will not be accepted. An electronic official transcript from your school is highly desirable. If your school is not able to send an electronic transcript, a version sent via mail will be accepted.

Applicant Signature_____   Date_____
                                                                                                       (mm/dd/yyyy)