



February 2026

### **Alice Mahone Scholarship**

Each year, Bedford Professional Women's Organization offers the Alice Mahone Scholarship to a graduating female senior from a Bedford County Public High School. Given in Memory of past Bedford BPW President Alice Mahone and first started by her husband with an initial amount of \$100, this \$2500 scholarship will be awarded to a female senior who has a financial need and has demonstrated academic achievement. Students should complete the application and mail to the address listed below\*.

**Applications must be postmarked by Wednesday, April 1, 2026.**

**Please mail completed applications to:**

Maggie M. Williamson  
Mahone Scholarship Chair  
1521 Oakwood Street  
Bedford VA 24523

**\*Applicants may also apply online via [www.bpwva.org/alice-mahone-scholarship](http://www.bpwva.org/alice-mahone-scholarship).  
Letter of Recommendation and transcript must be sent by respective student's school counselor via mail for printed and online applications**

Please direct any questions to: [magmil50@msn.com](mailto:magmil50@msn.com)

## Alice Mahone Scholarship Application Guidelines February 2026

1. Applicant must have a 3.0 grade average or above.
2. Applicant must be a female senior and accepted by a four-year college.
3. Applicant may not be a daughter of a BPW member.
4. Applicant must complete this application (application does not have to be typed).
5. Applicant must submit a copy of her 2025 - 2026 FAFSA Student Aid Index (SAI).
6. Applicant will request from her school counselor a letter of recommendation stating that she meets the scholarship requirements, has financial need, possesses leadership qualities, and has attainable goals.
7. Applicant will have her school counselor send her transcript AND letter of recommendation via mail to:  
  
Maggie Williamson  
Alice Mahone Scholarship Chair  
1521 Oakwood Street  
Bedford VA 24523
8. Applicants are responsible for ensuring that all documents have been sent and received.

## **Personal Data**

**All information provided will be regarded as confidential.**

Please complete all fields. Application does not have to be typed.

Attach additional pages if necessary.

Only pages 3-7 of the application plus requested documents must be submitted.

Name of Student:

Address:

Email Address:

Parent's name:

Parent's address:

Home telephone number:

Bedford County high school now attending:

Number/ages of siblings at home:

Occupation of father:

Occupation of mother:

Any extraordinary expenses such as medical expenses:

Name of college you expect to attend:

Address of the college:

Have you been accepted?

If not, have you applied?

College expenses for the first year (tuition, room and board):

Amount you and/or your parent(s) or guardian can provide for first year:

Amount from other sources (scholarships, etc.):

Do you work part-time during the school year?

If so, describe your job responsibilities, including hours worked per week.

Do you work during the summer?

If so, describe your job responsibilities, including hours worked per week.

How much of your income earned goes toward your education?

Comment on your future plans.

Explain why you feel you need a scholarship.

Describe your participation in high school and community organizations or activities and how many hours are spent on these activities. How many years have you been involved with these organizations?

Have you been the recipient of honors or awards? If so, give details.

## Student Certification

I am a student who is pursuing my degree. I understand that if I am the recipient of this scholarship, the monies will be paid directly to the institution of study named for my benefit. If for any reason I am selected and do not continue my education, I will immediately notify BPW.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_