

Verification of Current Enrollment for the Zonta Young Women in Leadership Award

Please return this form by:			
To Zonta Club or e-Club of:			
c/o:			
Address:			
City/State/Postal code/Country:			
Fax:			
Email:			
School/Institute:			
I certify that		is currently enrolled in	
(na	me)		
	at		
(grade level)		(name of school/institute currently attending)	
(address of scho	ool/institu	ute currently attending)	
(444,655 61 5611)	2017 III DEICE	accountry accounting,	
Signature of School/Institute Official is requi	red	Date	
(Official	School/Ir	nstitute Stamp)	