

Iowa Business and Professional Women Foundation Application
for Educational Scholarship Award 2021-2022

DEADLINE*: Must be postmarked or emailed by August 20, 2021 to be considered

***Requirement: Application, Transcripts, and References must be submitted simultaneously by August 20th.**

To complete electronically, download/save this form to your computer, open with Acrobat Reader, click Tools in toolbar, then click Fill and Sign. Save your completed form as a pdf and then attach the completed form (and transcripts and letters of reference) to an email or print to mail to our contact.

Name of Applicant _____ Telephone _____

Current Mailing Address: Street/POB _____

City, state, zip _____ E-mail _____

Are you a United States Citizen? Yes _____ No _____ Are you a BPW Member? Yes _____ No _____

Have you previously received a BPW Educational Scholarship Award? Yes _____ No _____

If yes, please list the date and the amount received. Date (M/Y) _____ Amount \$ _____

Which educational institution do you plan to attend? _____

Location: _____

What is your anticipated graduation date? Date _____ What is your major? _____

For what occupation are you training? _____

Please provide the following information:

· High School Name _____

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High School Location _____ Graduation date (M/Y) _____

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· List institutions of higher learning attended (if any):

· School M/Y graduation (if applicable) Degree (if applicable) Credits attained

· List honors received: _____

· List credits you have accumulated in the current year (indicate semester or quarter) _____

· List school and/or community activities in which you are involved: _____

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Financial Needs for One Academic Year-2021-2022

Last Name _____, First Name _____

Expenses

Tuition/Fees \$ _____

Spouse's Tuition/Fees _____

Books/Supplies _____

Child Care _____

Housing/Food _____

Utilities _____

Transportation _____

Medical/Dental _____

Miscellaneous Expenses: **List below**

Total Yearly Expenses \$ _____

Income

Applicant's After Tax Wages \$ _____

Miscellaneous Income

 a) child support _____

 b) spousal support _____

Spouse's After Tax Wages _____

Social Security Benefits _____

Scholarship Funds _____

Loan Funds _____

Veteran Benefits _____

Unemployment Benefits _____

Savings _____

Vocational Rehabilitation _____

Aid from family _____

Aid from Spouse's Family _____

Total Yearly Income \$ _____

Explain Miscellaneous Expense Listed: _____

List the total number of individuals that you are responsible for supporting including self. _____

Personal Goal Statement

Submit a paragraph about your personal goals that includes the following:

1. Reason(s) you should receive a BPW Educational Scholarship Award.
2. How you expect to use this training.
3. Other pertinent information the Educational Scholarship Committee should know.

***REQUIREMENT:** To be eligible for this scholarship, the applicant must:

1. Complete this application in its entirety,
2. Provide a copy of official transcripts from any accredited institutions of higher learning attended
(Transcripts if stamped "Issued to Student" are acceptable.)
3. Submit three (3) letters of reference from non-family members--one each from an employer, a teacher, and a community leader.
4. Submit Application, Transcripts, and References simultaneously by August 20, 2021.

Mail/email application, transcript, and references to: **Marcia Dirks, Chair**
Iowa BPW Foundation Educational Scholarship Program
 2845 430th Street
 Dickens, IA 51333-7574

mdscgirl@ncn.net

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