

Iowa Business and Professional Women Foundation Application for Educational Scholarship 2024-2025

DEADLINE: Documents must be postmarked or emailed by March 18, 2024 to be considered

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. Attach this completed pdf form and your support documents as instructed to an email or print to mail to our Scholarship Chair.

Applicant Name: _____

Current Mailing Address:

Street/P.O. Box: _____

City, State, Zip _____

Telephone _____ Email _____

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 amount received: _____ (Mo./Yr) Amount \$ _____

Which educational institution do you plan to attend? _____

Address/Location: _____

What semester/quarter next to apply scholarship if awarded: _____

What is your major? _____

For what occupation are you training for? _____

What is your anticipated graduation date? _____ (Mo/Yr)

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

Please provide the following information:

High School Name _____

Address _____

Graduation date _____

List institutions of higher education attended (if any):

<u>Name</u>	<u>Graduation Year</u>	<u>Degree</u>	<u># of Credits earned</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Last/First Name: _____

Financial Needs for One Academic Year 2024-2025

<u>Expenses:</u>		<u>Income:</u>	
Tuition and Fees		Applicant's after-tax annual wage	
Spouse's Tuition & Fees		Misc. income	
Books & Supplies		Child support	
Childcare		Spousal support	
Housing/food		Spouse's after-tax annual income	
Utilities		Social Security Benefits	
Transportation		Scholarship funds	
Medical/Dental		Loan funds	
Other/Miscellaneous- <i>List below</i>		Veteran's benefits	
		Unemployment benefits	
		Savings	
		Vocational Rehab	
		Aid from family	
		Aid from Spouse's family	
Total Annual Expenses:		Total Annual Income:	

Number of individuals you are responsible to support including self: _____

Personal Statement:

Submit a separate one-page statement explaining the following:

1. How the Iowa BPW Educational Scholarship will be useful to you.
2. How you expect to use this training.
3. Tell us about your employment, college, community, leadership activities including volunteering, honors and/or achievements in undergraduate studies and why you should receive consideration for our scholarship award.
4. Other pertinent information the Educational Scholarship Committee should know.

Checklist to be eligible for this scholarship

You must:

1. Complete this application in its entirety.
2. Your one-page personal statement document (include your name)
3. Provide a copy of official transcripts from all accredited institutions of higher ed attended. (Transcripts stamped "Issued to the Student" are acceptable.)
4. Submit three (3) letters of reference from non-family members—one each from an employer, an instructor, a community leader or pastor/priest.
5. **Submit application, personal statement, transcripts and references simultaneously by March 18, 2024*.**
6. Email to mdscgirl@ncn.net or mail to:
 Marcia Dirks, Chair
 Iowa BPW Foundation Educational Scholarship Program
 2845 430th St.
 Dickens, IA 51333-7574

*Application and documents must be emailed or postmarked by **March 18, 2024** to be considered for 2023-2024 scholarship awards.