

INFBPW/Zionsville

Requirements and check list

Requirements

- Must be a graduating High School Senior
- Attending an accredited post-secondary school
- A resident of Boone County

Check list

- Must attach recent copy of grades
- Must attach proof of acceptance to an accredited post-secondary institution
- Must attach statement of how this scholarship will help you with your Career Goals
- Must attach statement of Community involvement and activities
- Special circumstances (if applicable)

INFBPW/ZIONSVILLE

INDIANA FEDERATION OF BUSINESS AND PROFESSIONAL WOMEN'S CLUB OF ZIONSVILLE

SCHOLARSHIP APPLICATION FORM

The INFBPW/ZIONSVILLE Scholarship is presented to a graduating senior who **has applied and been accepted to an accredited post-secondary institution for at least part-time attendance.** This scholarship is only available to a graduating senior who is a Boone County resident prior to the date of this application. You are eligible to receive the scholarship one time. **Incomplete applications will be declined.** The recipient will be notified by mail.

PERSONAL DATA

Please print or type

Name _____ Age _____

Address _____

City, State, Zip _____ Phone _____

E-Mail _____

Name of High School _____

Date of high school graduation: _____

Employer's Name & Address (if applicable) _____

Will you continue to work for this employer during the school year? _____

Are you a relative of an INFBPW Member? _____

EDUCATION PROGRAM FOR WHICH SCHOLARSHIP IS REQUESTED

Name of college or university _____

Address _____

City, State, Zip _____

Attach your most recent grades _____

Field of Study/type of specialized training desired _____

Date to begin (mo/yr) _____ Expected date of completion _____

Expected Enrollment Status: (Check only one) () Full time () At least half-time but less than full
() Less than half-time

List all scholarships and amounts that you have received or anticipate you will receive this year _____

Attach proof of acceptance to an accredited post-secondary institution.

CAREER OBJECTIVES

Please attach a typed or printed statement (not more than 200 words) about your career goals and how your education plans relate to these goals.

COMMUNITY INVOLVEMENT AND ACTIVITIES

Please attach a typed or printed statement (not more than 200 words) about your community involvement and activities.

SPECIAL CIRCUMSTANCES (if applicable)

Please attach a typed or printed statement (not more than 200 words) explaining any unusual expenses, education and / or other debts or special circumstances, which you feel might be relevant to the review of this application.

CERTIFICATION

All of the information on this form and attachments is true and complete to the best of my knowledge. If asked by authorized officials, I agree to give proof of the information that I have given on this form. I also realize that if I do not provide proof when asked, further consideration of this application may be declined by the INFBPW. I agree to allow the INFBPW to publicize information about my scholarship award, including my photo, for publicity purposes.

Signature

Date

Deadline: Return this completed application and requested attachments to the High School Guidance Office, **no later than Friday, March 4th.**

This scholarship is in the amount of \$500.00