

**Business and Professional Women of Iowa Foundation
Application for Educational Scholarship Award**

(Please print clearly)

Name of Applicant _____ Telephone(____) _____

Current Address _____

_____ 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? _____

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

What is the type of occupation for which you are training? _____

Are you single? _____ Married? _____ Separated? _____ Divorced? _____ Widowed? _____

Do you have children? Yes _____ No _____ If yes, what are their ages? _____

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

What is you spouse's name (if applicable)? _____ His or her occupation? _____

Please provide the following information:

- Name/location/date of the high school where you graduated: H.S. name _____
H.S. location _____ Graduation date (M/Y) _____

- List any high school honors you received: _____

- List any college and/or business school attended: _____

School	M/Y graduation(if applicable)	Degree(if applicable)	All credits attained
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- List any honors received: _____

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

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

Financial Needs for One Academic Year

Expenses

Income

Tuition/Fees	\$ _____	Applicant's After Tax Wages	\$ _____
Spouse's Tuition/Fees	_____	Miscellaneous Income	_____
Books/Supplies	_____	a) child support	_____
Room/Board	_____	b) spousal support	_____
Housing/Food	_____	Spouse's After Tax Wages	_____
Utilities	_____	Social Security Benefits	_____
Transportation	_____	Scholarship Funds	_____
Medical/Dental	_____	Loan Funds	_____ Child
Care	_____	Vocational Rehabilitation	_____
Current Debt Repayment	_____	Savings	_____
Miscellaneous Expenses	_____	Veteran Benefits	_____
		Aid from family	_____
		Aid from Spouse's Family	_____
Total Yearly Expenses	\$ _____	Total Yearly Income	\$ _____

Please detail any miscellaneous expenses (if applicable). _____

Please detail any miscellaneous income (if applicable). _____

Have you applied, or do you plan to apply, for any other scholarship awards/grants? Yes _____ No _____

If yes, please list the scholarships applied for and the amounts. _____

Personal Goal Statement

Please print a brief paragraph about your personal goals (not to exceed 6 lines) that includes the following:

1. Why do you think you should receive a BPW Educational Scholarship Award?
2. How do you expect to use this training?
3. What other pertinent information do you think the Educational Scholarship Committee should know?

Note: In order to be eligible for this scholarship, the applicant must complete this application in its entirety. A copy of your official transcripts from an accredited college and three (3) letters of reference (employment, education, and/or community) must also be included. (Transcripts if stamped "Issued to Student" are acceptable.)

Applications and above list of documents must be mailed to Pat Brown, Chair, BPW/Iowa Foundation Educational Scholarship Program, 208 4th Avenue SE; Waverly, IA 50677. They must be postmarked by March 31, 2012, in order to be considered for this year's scholarship awards.