

SCHOLARSHIP APPLICATION

General Program

ABOUT IAMU/SCHOLARSHIP PROGRAM

SCHOLARSHIP PROGRAM CRITERIA

To be eligible, candidates must be the child or grandchild of a person employed by an IAMU member (utility, associate, or affiliate).

Applicants must demonstrate a history of participation in school activities or groups and/or community leadership.

- Attend college/technical school within the state of lowa
- Parent/Grandparent/Legal Guardian must be an employee of an IAMU verified member
- ◆ 3.0 minimum GPA





SCHOLARSHIP DETAILS

- ◆ \$500 awards
- Distributed to educational institution
- Application deadline: March 6
- Awarded by: May 1
- Submit application materials to scholarship@iamu.org
- Incomplete applications or applications with missing information will not be considered

ABOUT IAMU

Organized in 1947, the Iowa Association of Municipal Utilities represents 754 municipally owned broadband, electric, gas, and water utilities statewide.

Through this scholarship program IAMU continues our mission to support and strengthen lowa's municipal utilities.





Applicant Informatio	n				
Last Name	First Name	Middle			
Address					
		Zip Code			
Telephone	Date o	Date of Birth			
Email Address					
IAMU Member Inforr					
Employer (Utility, Associa	te, or Affiliate Name)				
How Many Years Employ	oyed Phone Number				
City	State	Zip Code			
		Graduation Date			
Address					
		Zip Code			
Class RankN	umber of Students in you	ır class GPA			
Post-Secondary Sch	ool				
Name of School	City	State			
4 Yr. College or Univ.	2 Yr. Community or	Junior College			
Vocational, Technical	or Trade School Oth	er, explain			
Major or Course of Study					
Degree Sought Bache	lor Associate Certi	ficate Other			

Activities,	Awards	and	Honors
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List all school activities you have participated in during the past four years. List all community activities in which you have participated in during the past four years without pay. Attach sheet if additional space is required.

Activity		
# of yrs	_Special awards, honors	Titles Held
Activity		
# of yrs	Special awards, honors	Titles Held
Activity		
# of yrs	_Special awards, honors	Titles Held
Activity		
# of yrs	_Special awards, honors	Titles Held

Additional Application Requirements

- Include a brief typed summary of your plans as they relate your educational and long-term career goals.
- Include a letter of recommendation from a teacher, administrator, or community leader.

Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If awarded a scholarship, all funds received shall be used to attend the institution of higher learning indicated in this application. False information will result in the revocation of any scholarship granted.

Applicant Signature	Date	
Parent/Guardian Signature	Date	

