INDIANA LIBRARY FEDERATION SIGNATURE SHEET FOR SCHOLARSHIP
Application Deadline: June 30, 2020

Name: ________________________________________________________________________________

Address: _____________________________________ City, State, Zip: ____________________________

Daytime Phone: (_____)________________ E-mail: ___________________________________________

How many hours will you be enrolled (ex. 0, 3, 6, 9 or 12):

___ Fall 2020 __Spring 2021 ___Summer I 2021 ___Summer II 2021

Please include the following with your application. All materials must be received in order to be considered for a scholarship.

☐ College Transcript – Please verify with the ILF Office that your transcript(s) have been received.

☐ Brief Essay: On a separate sheet of paper, please answer the following questions: 1) What are your reasons for wanting to become a librarian/school librarian? 2) What are your career goals? 3) In what ways will your previous experience aid you as a librarian/school librarian?

☐ Three (3) letters of Recommendation. Applicants should ask three individuals (not relatives) to write a letter of recommendation concerning their ability and worthiness to receive a scholarship for library education. At least one of these references should be a professional librarian or school librarian.

☐ Two to five minute video, addressing questions proposed by Awards & Honors Committee. (Please contact ILF office for format.)

☐ Application Form Online

☐ Application Signature Sheet

If scholarship is awarded to me and I do not attend school for the date specified, the granting of the award will be void. If I resume my education later and still need aid, I shall file a new application. I understand that the purpose of Indiana Library Federation scholarships is to encourage library employment in Indiana and I agree, if awarded the scholarship, to repay it as a loan if I do not accept employment in an Indiana library within one year after completing my library education, and if I do not continue to work in an Indiana library for at least one year after I accept such employment.

Signature: ____________________________________________________________________________ Date: _______________________

Please return completed scholarship application to: Awards, Honors, and Scholarship Committee
Indiana Library Federation, 941 E. 86th Street, Suite 260, Indianapolis, IN, 46240
Phone: (317)257-2040, Fax: (317) 257-1389