

ILLINOIS FEDERATION OF BUSINESS WOMEN'S CLUBS
2020 SCHOLARSHIP REQUIREMENTS – INCOMING FRESHMAN



The Illinois Federation of Business Women's Clubs, Inc. (IFBWC) is very committed to education, as education for all women is one of the primary goals supported by IFBWC since its existence. IFBWC views a lack of education as the primary barrier to self-sufficiency and an improved quality of life. As a result of that commitment, when you investigate our organization as a whole or one of the local organizations throughout the state of Illinois, you will find that in almost all cases, IFBWC has been very generous in our financial assistance to women interested in furthering their education. For more information about IFBWC, visit our website at www.ifbwc.org.

Established in 2018, IFBWC proudly offers a scholarship program for high school seniors and/or incoming college freshmen who meet the following application requirements:

1. Applicant must be female, a U.S. citizen, and a resident of the state of Illinois.
2. Applicant must be a graduating senior in 2020 or earlier who has been accepted to attend an accredited trade school, college, or university as a full-time incoming freshman for the Fall 2020 semester.
3. Applicant must hold a minimum cumulative grade point average of 3.0 on a 4-point scale as of the completion of the Fall 2019 semester.
4. While not a sole determining factor, preference may be given to qualified applicants demonstrating financial need.
5. Successful applicants **must** be willing and available to compete in the Young Professional public speaking competition at the IFBWC State Convention on Saturday, May 2, 2020, in Champaign, Ill. (additional competition details are available on our website or by request). Competition results will not affect the scholarship award; however, failure to participate will result in forfeiture of the award.

Application must include the following:

- a cover letter requesting consideration of application;
- a completed application form with all requested information, signatures, and dates;
- a 200-300 word essay (typed) stating the applicant's future educational plans and goals, including the profession she hopes to enter and an explanation as to why she has chosen this field of study;
- a high school transcript that includes all grades received through the Fall 2019 semester;
- two (2) signed letters of recommendation from professional, advisory, or educational references (*may include, but not limited to, teachers, coaches, sponsors, mentors, or advisers; avoid personal references like relatives, neighbors, or friends*).

Applications must be submitted by **March 1, 2020**. They may be sent electronically or mailed (postmarked on or before **March 1**) to:

Alishia Winkler, IFBW Education Chair
440 N. Illinois Ave.
Salem, IL 62881
education@ifbwc.org

The items described in the list above must be submitted together to constitute a complete application. Incomplete applications will not be considered. No exceptions will be made, and all decisions will be final.

*Scholarships awarded will be paid directly to the school. For prompt fund distribution, successful recipients must provide proof of graduation, proof of full-time enrollment for the Fall 2020 semester, and a letter from the school registrar with instructions for payment no later than **July 15, 2020**.*

ILLINOIS FEDERATION OF BUSINESS WOMEN'S CLUBS
2020 SCHOLARSHIP APPLICATION – INCOMING FRESHMAN



APPLICANT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone Number _____ Date of Birth _____

Are you a U.S. Citizen? YES NO Last four digits of SS #* _____

Marital Status: Single Married Divorced Number of Dependents _____

High School _____ Cumulative GPA _____

College where accepted/enrolled (*name & address; if undecided, include top choice*):

Major Field(s) of Study _____

Annual Tuition \$ _____ Annual Room and Board \$ _____

Expected living arrangements: On Campus Off Campus At Home

How did you hear about this scholarship? _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1 _____

Address (*if different*) _____

City _____ State _____ Zip _____

Phone Number _____ Relationship to Applicant _____

Employment (*Company, Title*) _____

Number of Dependents in Household _____ Dependents' Ages _____

Parent/Guardian 2 _____

Address (*if different*) _____

City _____ State _____ Zip _____

Phone Number _____ Relationship to Applicant _____

Employment (*Company, Title*) _____

Combined adjusted gross income for applicant's primary household (*check one*):

Under \$25,000 \$25,000-\$50,000 \$50,001-\$75,000 \$75,001-\$100,000 Over \$100,000

*Complete number will be requested from scholarship winners for identification and fund disbursement purposes only.
All information on this application will be kept confidential and will never be shared with any other parties.

AWARDS AND RECOGNITION

Please list any awards, honors, and recognition received (*both school and non-school*). Use an additional piece of paper, if needed.

EXTRA-CURRICULAR ACTIVITIES

Please list any sports, extra-curricular activities, organizations, and volunteer activities in which you regularly participate, as well as any leadership roles or offices held (*both school and non-school*). Use an additional piece of paper, if needed.

FINANCIAL NEED

Applicant Employment Status: Part-time Full-time Not Employed

Name of Current Employer: _____

Gross Income of Applicant for last calendar year \$ _____

Funds expected for next year’s education fees:
(total of all sources should equal total of tuition & room/board from previous page)

Parents..... \$ _____ Scholarships..... \$ _____ Self \$ _____

Pell/MAP..... \$ _____ Work Study \$ _____ Loans..... \$ _____

Other (*list sources*) _____ \$ _____

Do you have any current outstanding educational loans? YES NO Amount \$ _____

I certify that all the information on this application is true and correct to the best of my knowledge, and I understand that any inaccuracies will result in my (my child) being disqualified for this scholarship.

Signature of Applicant _____ Date _____

Signature of Parent _____ Date _____