



INDIANA EXTENSION HOMEMAKERS ASSOCIATION®

“STEPS TO SUCCESS” SCHOLARSHIP

&

Vocational or Technical Scholarship

SCHOLARSHIP GUIDELINES

- 1. Applicant must be a resident of the State of Indiana.
2. Applicant must be admitted or be enrolled in an accredited college or university or an accredited vocational or technical program.
4. Vocational and technical scholarship applicants must include a letter from school advisor stating that candidate is on track for graduation.
5. Attach the following to completed application:
a. Two (2) character reference letters from persons not related to you.
b. Official High School transcript of courses completed, including GPA and class rank.
c. A copy of the College/School acceptance letter, if courses have not started.
d. A copy of acceptance letter to an accredited vocational/technical school.
e. A letter of recommendation from your primary technical instructor or director.
f. A 500-word essay describing the life skills applicant has developed through high school and community involvement.
6. Applications must be postmarked by MAY 1 to be considered. Applications postmarked after May 1 will not be considered.

CRITERIA FOR JUDGING SCHOLARSHIPS

- Applications should be typed or clearly printed. Applications that are incomplete or have missing information will not be considered.
• Scholarships will be granted toward Undergraduate degrees, not Master degrees.
• Scholarships will be awarded with regard to financial need.
• Certified or registered mail is optional and not a requirement.
• Former winners may apply again.

Consideration is given to the following:

- A. Organization, neatness, grammar, and clarity of the application
B. Financial need, based on stated available funds.
C. Proven ability on a course of study, if currently enrolled.
D. Clear goals & realistic expectations.
E. The transcript of grades indicates the ability to do advanced work.

POINT SYSTEM USED FOR JUDGING

Table with 2 columns: Criteria and Maximum Points. Rows include Financial Need (40), Potential success in chosen field (20), Volunteer/Community Service (20), Willingness to self-help (10), References (5), Neatness of application (5), and Total points (100).

The Mission of the Indiana Extension Homemakers Association is to strengthen families through continuing education, leadership development and volunteer community support.

Mail your completed application to the IEHA IMMEDIATE PAST PRESIDENT

Visit ieha-families.org to get name and address.

Five (5) \$500.00 scholarships will be given: Four (4) to an applicant admitted to or enrolled in a state accredited college or university and one (1) to a state accredited vocational and technical program.



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SEE ATTACHED SHEET FOR INSTRUCTIONS FOR COMPLETING APPLICATION

County _____ IEHA District _____

Applicant's Name _____

Present Address _____

City _____ State _____ Zip _____ Telephone (____) _____

Age _____ Male _____ Female _____ Are you currently employed? Yes _____ No _____

Name of current employer (if employed) _____

Position _____ Salary/Wages _____

What will be the source of your educational funds? (i.e. Family income, scholarship, grants, savings, etc.)

Have you received this scholarship before? Yes _____ No _____ If yes, when? _____

Why do you have a financial need? _____

What is your course of study? _____

What are your goals and the time line for accomplishing these goals? _____

Extra-Curricular Participation _____

IEHA Mission Statement:
 To strengthen families through continuing education,
 leadership development and volunteer community support

Community Service Activities _____

EDUCATIONAL INSTITUTION WHERE ENROLLMENT HAS BEEN ACCEPTED

Institution's Name _____
Course of Study _____
Degree Sought _____ Expected Date of Completion _____
Amount of Tuition/Fees per Semester \$ _____
Date Payment Must be Made _____ Date Term Begins _____
Date of admission acceptance _____ School Year _____

STATEMENT BY APPLICANT:

I personally have prepared this report and certify that it accurately reflects my work:

_____ Date _____
*Signature of Applicant

APPROVAL OF THIS REPORT

We have reviewed this report and believe it to be correct:

_____ Date _____
*Signed Parent or Guardian

NOTE: This application will not be returned (copy before submitting).

*Signature indicates implied consent that these materials will be reviewed by the selection committee.

SCHOLARSHIP WINNER WILL BE NOTIFIED BY JULY 1.

PAYMENT WILL BE MADE AFTER AUGUST 1.

THE SCHOLARSHIP WILL BE PAID IN THE AMOUNT OF \$500.00 FOR A PERIOD OF STUDY NOT TO EXCEED 12 MONTHS.

MUST BE POSTMARKED BY May 1

SEND COMPLETED APPLICATION with all ATTACHMENTS TO:

Current IEHA Past President
Visit IEHA Website for name and address
ieha-families.org

Prepared February 2019