

IaAWP Phoenix Scholarship Application

You must submit your materials by March 1<sup>st</sup> of the year applying.

I, \_\_\_\_\_ have read and understand the conditions of the Phoenix Scholarship as stated in the scholarship requirements (available on the Iowa Assoc. of Women Police website). I give permission to officials of my institution or high school to release transcripts of my academic record and other information requested for consideration in the Phoenix Scholarship program. I understand that this application will be available only to qualified people who need to see it in the course of their duties. I affirm that all entries of this application are my own work or formally cited from other sources. I affirm the information contained herein is true and accurate to the best of my knowledge and belief.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Are you a Member of the Iowa Association of Women Police: YES \_\_\_\_\_

Relationship of IaAWP member to the applicant: \_\_\_\_\_

**(Print/Type)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Permanent residence: Number, Street, and Apartment Number: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Your address at school (if different) #, Street, and Apartment #: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home telephone: \_\_\_\_\_ Cell telephone: (if different) \_\_\_\_\_

E-mail address: \_\_\_\_\_

Other: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Month/Day/Year of application: \_\_\_\_\_

Current cumulative GPA: \_\_\_\_\_

Your undergraduate major(s): \_\_\_\_\_

Number of college credits earned to date: \_\_\_\_\_

Total number of credits required for graduation: \_\_\_\_\_

Expected date to receive degree: \_\_\_\_\_

Degree you will receive: \_\_\_\_\_

Graduate degree(s) sought: \_\_\_\_\_

Concentration(s): \_\_\_\_\_

Name \_\_\_\_\_

1. List the secondary school from which you graduated, and all higher education institutions attended. Include summer, study-abroad.

School:

Location:

Dates Attended:

2. List college and high school activities (student government, sports, publications, school-sponsored community service programs, student-faculty committees, arts, music, etc.). List in descending order of significance. You will have space for eight college and four high school activities.

College Activity, Dates, and Offices:

\*Please attach a 300-500 word essay on your personal and professional goals.

\*Please attach a copy of your current transcript from the institution you are attending, high school or college.

\*\* Mail all info to: IaAWP Scholarship, %Becky Moser, 11159 NW 121<sup>st</sup> Ct., Granger, Iowa 50109

An email confirmation will be sent when materials arrive.