Barb Miller Memorial Scholarship Application Form

REQUIREMENTS:

- Applicant must be a full-time student, incoming Freshman through incoming Senior, at a 2 or 4 year accredited college or university.
- Current active member of USA WATER SKI & IWSA
- Awards are for one year only---recipients may reapply each year--- one person can receive the award for no more than 3 times.
- U. S. Citizenship—Indiana resident

HOW TO APPLY:

Write to the Indiana Water Ski Association at:

IWSA, Scholarship C/O Randy Sharkey 12266 E. Jefferson Mishawaka, IN 46545

to receive an application or download the application from our web site.

DEADLINE FOR APPLICATION:

July 1

SELECTION COMMITTEE:

 An IWSA state selection committee will chose finalists based on the information provided in the application, references and grade transcripts.

SELECTION CRITERIA:

- Academic
- Leadership
- Extracurricular Involvement
- Letters of recommendation
- Number of years in USA WATER SKI & IWSA
- Student's Financial Need
- Essay

NOTIFICATION OF SCHOLARSHIP AWARD:

Recipient will be awarded the scholarship at the state tournament by the scholarship committee.

PERSONAL INFORMATION - For office use only

Name	Gender	SS#
School Mailing Address		City, State and Zip Code
Daytime Phone # Bir	rth Date	Student ID #
Father's Name	Daytime Phone #	Occupation
Employer	☐ Yes Matching	□ No Gift Available?
Father's Address		City, State and Zip Code
Mother's Name	Daytime Phone #	Occupation
Employer	☐ Yes Matching	□ No Gift Available?
Mother's Address		City, State and Zip Code
List only two references <u>not related</u> to you one academ It is the applicant's responsibility to ensure that these Ref Scholarship by July 1.		
Name (Academic reference)	Daytime Phone #	
Address		City, State and Zip Code
Name (Other reference with connection to water-skiing)	Daytime Phone #	
Address		City, State and Zip Code

APPLICATION

Member of USA Water Ski (All Divisions	s) 🗆 Yes 🗆 No	Number of Years		
Membership #				
High School	Graduation	Date	Age	
College	Busi	ness Phone		
AddressStreet	0:4		04-4-	7:
			State	Zip
College:4 Year				
College GPA: (4.0 System)				
ACT Score SAT Score _				
Current Class Standing (FR, SO, JR,				
Career (if established)		College Major _		
Do you plan to earn a Bachelor's Degre	e?	Month		Year
		Year _		
Employment History (most recent first)			Time Emplo	pyed
Position Fu	ıll-Time/Part-Time	Month	n/Year to Mo	onth/Year
Special family or personal circumstance	es to be considered by S	cholarship Committee:		
No. of Children in family (including your	self) Ages	# Presentl	y in College	

APPLICATION (Cont'd)

Are you presently receiving a sch	olarship/grant?	_Yes No		(If yes, please list below
	Amount	Year Received	Duration	
	Amount	Year Received	Duration	
	Amount	Year Received	Duration	
Have you previously received an	IWSA Scholarship?	Yes	No	
Career Objectives:				
Describe your volunteer involvem	ent in water skiing (d	club activities, offices held	, tournaments, spe	cial projects, etc.)
How have you been involved in w	ater skiing during th	e past year?		
Non-Ski Related Extracurricular <i>I</i>	Activities:			
Honors Received (Also include N	on-Ski Honors):			
Why are you applying for this sch	olarship? (This is yo	our opportunity to advise o	f any special finan	cial need.)
As a recipient, how do you feel yo	ou could contribute to	o water skiing?		

Essay must be typed.	
•	n given is true and correct. Further, I authorize the release of information scores and high school and/or college grade point averages, to the IWSA nors.
	Signature of Applicant
	Date

IWSA Scholarship c/o Randy Sharkey 12266 E. Jefferson Mishawaka, IN 46545

Office	Use	Only

Scholarship Reference Form

Return by July 1 to: IWSA Scholarship C/O Randy Sharkey 12266 E. Jefferson Mishawaka, IN 46545 Phone 574-255-3572

<u>Scholarship References</u> - Must be received by **July 1**, for applicant to be considered.

(Please comment on those qualities and/or activities which, in your opinion, make this individual uniquely deserving.)

PLEASE DO NOT REFER TO THE STUDENT BY NAME!!			
Print Name of Reference	Signature	Date	
Relation to Student:			
Student Name (Print):			

Office	Use	Only

Scholarship Reference Form

Return by July 1 to: IWSA Scholarship C/O Randy Sharkey 12266 E. Jefferson Mishawaka, IN 46545 Phone 574-255-3572

<u>Scholarship References</u> - Must be received by **July 1**, for applicant to be considered.

Student Name (Print):

PLEASE DO NOT REFER TO THE STUDENT BY NAME!!

Relation to Student:

(Please comment on those qualities and/or activities which, in your opinion, make this individual uniquely deserving.)

Print Name of Reference	Signature	Date