SCHOLARSHIP APPLICATION

General Program



About IAMU/Scholarship Program

SCHOLARSHIP PROGRAM CRITERIA

To be eligible, candidates must be the child or grandchild of a person employed by an IAMU member (utility, associate, or affiliate).

Applicants must demonstrate a history of participation in school activities or groups and/or community leadership.

- Attend college/technical school within the state of lowa
- Undergraduate or trade programs only
- Parent/Grandparent/Legal Guardian must be an employee of an IAMU verified member
- 3.0 minimum GPA





SCHOLARSHIP DETAILS

- \$500 awards
- Distributed to educational institution
- Application deadline: February 23, 2024
- Awarded by: April 26, 2024
- Submit application materials to scholarship@iamu.org
- Incomplete applications or applications with missing information will not be considered

ABOUT IAMU

Organized in 1947, the Iowa Association of Municipal Utilities represents 754 municipally owned broadband, electric, gas and water utilities statewide.

Through this scholarship program IAMU continues our mission to support and strengthen lowa's municipal utilities.

Application



Applicant Information

Last Name	First Name	Middle		
Address		 		
		Zip Code		
	Date of Birth			
Email Address				
IAMU Utility Member Infor	mation			
Parent/Grandparent/Legal Gua	ardan			
low Many Years Employed Phone Number				
City	State	Zip Code		
High School Information	Cros	dustion Data		
		duation Date		
Address	Chata	7in Code		
		Zip Code		
Class Rank Number	er of Students in your class_	GPA		
Post-Secondary School				
Name of School	City	State		
4 Yr. College or Univ.				
<u> </u>	_ <u>_</u>	in		
Major or Course of Study				
Degree Sought Bachelor	Associate			
Certificate	e			

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1735 NE 70th Avenue Ankeny, Iowa 50021-9353 Phone: 515/289-1999 scholarship@iamu.org www.iamu.org



Activities, Awards and Honors

List all school activities you have participated in during the past four years. List all community activities in which you have participated in during the past four years without pay. Attach sheet if additional space is required.

Activity			
# of yrs	Special awards, honors	Titles Held	
Activity			
# of yrs	Special awards, honors	Titles Held	
Activity			
# of yrs	Special awards, honors	Titles Held	
Activity			
# of yrs	Special awards, honors	Titles Held	
career go	brief typed summary of your plans as tals. letter of recommendation from a high s		long-term
my knowledg	this application, I certify that the infornge. If awarded a scholarship, all funds reated in this application. False informat	received shall be used to attend	the institution of highe
Applicant S	ignature	Date	
Parent/Guai	rdian Signature	Date	