



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: Category and Maximum Points. Categories 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:

Cindy Saferight
8215 Woodlawn Drive
Martinsville IN 46151

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.



“STEPS TO SUCCESS” SCHOLARSHIP  
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Indiana Extension Homemakers Association®

**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:

Cindy Saferight  
8215 Woodlawn Drive  
Martinsville IN 46151