

INDIANA FEDERATION OF MOTHERS OF TWINS CLUB

SCHOLARSHIP FORM



Guidelines:

1. Name to be "Past Presidents Scholarship"
2. The scholarship fund shall be handled by the advisory board.
3. Advisory board will keep accurate records of all monies concerning the fund.
4. Two (2) scholarships are awarded each year.
5. Each scholarship is to be awarded for \$200.00.
6. Any member of IFMOTC is entitled to apply for a scholarship from the fund providing; she is a member in good standing in a local club hence federation for over two years to be eligible to apply.
7. She must submit an application to be considered for scholarship. Application is due to the advisory board by May 1 as to allow the work to be handled for presentation at convention. (The advisory board consists of all past presidents.)
8. She can receive a scholarship only once unless there are no other applicants. Any applicant may apply more than once if not previously chosen.
9. She must submit a summary of courses for which she will be using the funds.
10. The money is to be used for continuing her education only (tuition, fees, books or materials for the courses).
11. She must furnish proof of furthering education with the scholarship money or repay the money with 10% interest on unpaid balance until all unused money is repaid.
12. The way a member is chosen to receive funds is: all applicants names are put in a box and names are pulled out to determine recipient.
13. Accurate records should be kept of all recipients of funds.
14. All information guidelines are in every procedure manual.

**INDIANA FEDERATION OF MOTHERS OF TWINS CLUB
PAST PRESIDENTS SCHOLARSHIP FORM**

Name in full: _____ Application date: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Social Security #: _____
Spouses Name in full: _____
Club Affiliate: _____ Years as a member: _____
College or University attending: _____
Address: _____
Trade or Vocational School attending: _____
Address: _____
Course(s) taking: _____
_____ Completion date: _____
My vocation is to be: _____
My final degree is to be: _____
_____ Graduation date: _____

THIS SCHOLARSHIP IS GIVEN THROUGH THE INDIANA FEDERATION OF MOTHERS OF TWINS CLUB

Applicant's signature

Deadline May 1
Send completed application to:
Loretta Christofferson
641 South Wisconsin Street
Hobart, IN 46342

Advisory board action: _____
Date: _____

