



Independent Insurance Agents of Illinois College Scholarship



The Independent Insurance Agents of Illinois Association is proud to offer students within a business degree program the opportunity to earn up to \$5000 towards their future education. The application is for the 2009-2010 school year. Deadline for application is July 1, 2009.

Qualifications:

- Must be a resident of Illinois
- Must be in a business degree program with an interest in insurance
- Must be a full-time student
- Must have a junior or senior status in an Illinois College or University

Please print or type all information - Application deadline is July 1

Name: (Last, First, Middle) _____

E-mail: _____

Permanent Address: _____

Address While at School: _____

Home Phone: () _____ School Phone: () _____ Cell Phone: () _____

Birth Date: ___/___/___ Social Security #: _____ Are you a U.S. Citizen? _____

Name of College/University: _____

College/University Address: _____

Financial Aid Director: _____

Major: _____ Expected Graduation Date: _____ Current GPA: _____

Class Level (for 2009-2010 year): Junior Senior

Total Hours Completed: _____ Insurance Hours: _____ Other Business: _____

Please list the insurance courses you've taken

Course Name	Credit Hour	Course Name	Credit Hour
_____	/	_____	/
_____	/	_____	/
_____	/	_____	/

(continued on back)

Work Experience: (List your last two jobs or money-making projects)

Employer: _____ Dates: _____

Position: _____ Supervisor: _____

Employer: _____ Dates: _____

Position: _____ Supervisor: _____

Other Colleges Attended:

Name of college: _____

Address: _____

Dates Attended: _____ Major: _____

GPA: _____ Credit Hours Completed: _____

(Attach additional sheets with this information, if necessary.)

Personal Statement

Attach a one or two page essay summarizing your career objectives, academic accomplishments, work experience, and pertinent extracurricular activities, as well as your reasons for applying for this scholarship.

References

Please submit a letter of recommendation from an IIA of Illinois sponsor (current member in good standing or a retired member). Applications will not be processed until recommendation letters are received. If you do not have an IIA of IL sponsor one will be appointed and an interview scheduled.

Applicant's Statement

I certify that the above requested information is correct and true to the best of my knowledge. If the Independent Insurance Agents Scholarship is granted, I will use the funds solely for the payment of tuition, fees, or books at the post secondary institution specified. I understand that misrepresentation of facts called for on this application will disqualify me from further consideration, and if awarded the scholarship, will be cause for revocation of the same.

I grant the Scholarship Committee permission to use my name and/or likeness to publicize and/or promote the scholarship program.

I understand the the scholarship will be awarded in part over two semesters (one year) and that at any point during that time can be revoked if necessary. I agree to keep my grades and overall status within good standing as set forth by my college/ university and understand that if at any point the IIA of IL Scholarship Committee deems necessary may withdraw the future installment(s) of the scholarship based on my behavior.

I agree to inform the Scholarship Committee in the event that: a)my educational program is interrupted or terminated, or b) my current address or telephone number changes.

Date: _____ Signature: _____

PLEASE NOTE: All information (application, personal statement, reference, transcript) requested must be received by July 1. Incomplete applications or those received after the deadline will not be considered. It is the applicants responsibility to verify receipt of information.

Return Application to:

Scholarship Committee • IIA of Illinois • 4360 Wabash Ave. • Springfield, IL 62711

Phone: (800) 628-6436 ext. 3004 • Fax: (217) 793-6744 • schurchill@iiaofillinois.org