



3100 S. Vista Ave., Ste. 202  
Boise, ID 83705  
208.345.5176  
IAHD.com

## IAHD SCHOLARSHIP FUND, INC. 2020 - 2021 APPLICATION REQUIREMENTS

### INSTRUCTIONS

Scholarships up to \$1,000 will be awarded to the winners as selected by the IAHD Scholarship Committee.

All application requirements must be completed and post-marked by the **deadline of Tuesday, March 31, 2020** or the application will be eliminated from consideration. Applications will be reviewed by Friday, May 15, 2020. Thereafter, all applicants will receive a letter from the IAHD Scholarship Fund declaring the status of their application.

### ELIGIBILITY

Children and grandchildren of highway district commissioners and employees (highway district employees are those who are issued a paycheck by the highway district) are eligible for the IAHD Scholarship. The employing highway district must be in good standing and a member of the Idaho Association of Highway Districts. Applicants must have a 2.5 GPA or higher to be eligible for the scholarship.

Applicants must attend an Idaho college, university, or vocational/technical school full-time or part-time for the 2020 – 2021 academic year; or be enrolled in either an academic or vocational education program leading towards a degree or certification.

### APPLICATION REQUIREMENTS

1. A completed application form (attached) and application checklist (attached).
2. A personal statement of not more than five hundred (500) words addressing **all three** of the items listed below:
  - a. Describe how you will use your education to benefit your community.
  - b. What roadblock or impediment have you overcome in your life and how has it impacted and changed you?
  - c. What role does public service play in your life and how will you continue to serve the public in the future?
3. Certified (official) transcripts from your high school and any college(s) you have attended or are attending.
4. Two sealed letters of recommendation from individuals who are specifically aware and supportive of your academic or leadership capabilities as well as your accomplishments to date. These letters must be from persons NOT related to you. *Examples: employer, teacher, counselor, professor, supervisor, community leader, or adult family friend.*
5. On a separate sheet, you must list and describe (be specific and include dates):
  - a. School and Community Involvement, including volunteer activities and extracurricular activities
  - b. Honors and Awards

Applications will be reviewed by an unbiased panel and graded on a point scale based on the listed requirements. Scholarships will be awarded to those with the highest cumulative point total. The highest number of points will be assigned to your personal statement, in which you should compose it with this in mind. *Awardees may be asked to record a short video to describe benefits of receiving the scholarship for fundraising purposes.*



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**Your complete scholarship application packet must include:**

- This form signed and dated
- Completed application form
- Personal Statement
- Completed application checklist
- A separate sheet listing your school and community activities and awards (with dates)
- Two sealed letters of recommendations
- Official sealed high school and college transcripts

**NOTE:**

This application, personal statement, checklist, and list of activities **must be submitted as a single packet**. If possible, please include sealed transcripts and letters of recommendation within the packet.

If your school's policy is to mail the transcripts separately, it must be post-marked by the **deadline of Tuesday, March 31, 2020**.

If your letters of recommendations are mailed separately they must be post-marked by the **deadline of Tuesday, March 31, 2020**.

If the packet is not complete and/or post-marked by the **deadline of Tuesday, March 31, 2020**, it will be eliminated from consideration.

**Please mail your application package items to:**

IAHD Scholarship Fund  
3100 S. Vista Ave., Ste. 202  
Boise, ID 83705

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name\* (Print): \_\_\_\_\_

*\* Required if the applicant is under the age of 18*



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## IAHD SCHOLARSHIP FUND APPLICATION FORM

**DEADLINE FOR APPLICATION: Must be post-marked by Tuesday, March 31, 2019**

You must complete and submit all requested information requirements before the deadline or your application will be eliminated from consideration.

Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

College Year (Fall 2020): \_\_\_\_ Freshman \_\_\_\_ Sophomore \_\_\_\_ Junior \_\_\_\_ Senior \_\_\_\_ Other \_\_\_\_\_

School you have declared to/will be attending in fall 2020 (College, University, or Vocational/Technical):  
\_\_\_\_\_

Declared Major: \_\_\_\_\_ Declared Minor: \_\_\_\_\_

School you have attended or are currently attending (College, University, or Vocational/Technical):

Current School: \_\_\_\_\_ Current GPA: \_\_\_\_\_

School Attended: \_\_\_\_\_ GPA: \_\_\_\_\_

**Name of Parent or Grandparent** (Highway District Commissioner or Employee):

\_\_\_\_\_ Relation: \_\_\_\_\_

Highway District of Employment: \_\_\_\_\_ Position: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_



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**IAHD SCHOLARSHIP FUND 2020  
APPLICATION COMPLETION CHECKLIST**

Applicant Name: \_\_\_\_\_

Highway District: \_\_\_\_\_

Have you previously been awarded the IAHD Scholarship Fund? Circle one: Yes / No Year: \_\_\_\_\_

If selected as an awardee, I give the IAHD Scholarship Fund permission to use my first name and/or material from my personal statement to promote the fund and its mission (optional). Circle one: Yes / No

**COMPLETION CHECKLIST:**

\_\_\_\_\_ COMPLETED APPLICATION FORM

\_\_\_\_\_ LIST OF SCHOOL/COMMUNITY INVOLVEMENT & HONORS/AWARDS

\_\_\_\_\_ PERSONAL STATEMENT

\_\_\_\_\_ HIGHWAY DISTRICT EMPLOYEE OR COMMISSIONER (Name, Position below)

\_\_\_\_\_

----- For Official Use Only -----

\_\_\_\_\_ COMPLETE          \_\_\_\_\_ INCOMPLETE AND DISQUALIFIED

\_\_\_\_\_ DISQUALIFIED FOR OTHER REASONS

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_