



Indiana Regional Sewer District Association

*True Equality
for
Water Ecology*

301 S. Williams Street • P. O. Box 147 • Lewisville, IN 47352
Phone: 765-987-8432 • Fax: 765-987-8352

SCHOLARSHIP APPLICATION

(Please Type or Print)

A. Personal Information

Name: (Last) _____ (First) _____ (MI) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Email: _____

B. Member Information *(Applicant must be a dependent child or relative of IRSDA member)*

Utility Name: _____

Employee Name: _____

Applicant's Relationship to Employee: _____

C. High School Information *(Transcript must be submitted with application)*

Attach a typed list of academic awards, memberships or other special recognition you have received while in high school.

School Name: _____ Graduation Date: _____

Address: _____ City: _____ State: _____ Zip: _____

GPA: _____ ACT/SAT Score (total): _____ Class Rank: _____ out of: _____

D. College / University Information

Will Fall 2021 be your first semester? Yes _____ No _____ (If "No", college transcript is required)

If "No", indicate credit hours completed: _____

If "No", indicated credit hours required to graduate: _____

School Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Please indicate: _____ 4 year College/University
_____ 2 year Community/Junior College
_____ Vocational/Technical School
_____ Other, Specify: _____

Major Course of Study: _____
(Priority will be given but not limited to wastewater/water/environmental related studies)

E. Financial Information

Please indicate which of the following income ranges matches your gross family income:

_____ Under \$30,000 _____ \$30,000 - \$50,000 _____ \$50,000 - \$70,000 _____ Over \$70,000

If you are receiving other financial aid please itemize by name and amount.

Name: _____ Amount: _____

Name: _____ Amount: _____

Name: _____ Amount: _____

If there are any family circumstances that influence your need for financial assistance, please describe:

F. Essay

On a separate, please type, a brief essay on your goals as they relate to your education, career and future plans in 250 words or less.

G. Certification

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. False information will result in revocation of any scholarship granted.

Applicant's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

OFFICIAL RULES

This grant will be made to defray the cost of educational expenses at an accredited institution of higher learning approved by the Indiana Regional Sewer District Association. Disbursement of the money will be made upon presentation of proof of enrollment (transcript or invoice.) The scholarship money will be paid directly to the scholarship winner. Applicants must be a citizen or legal resident of the United States, a resident of the state of Indiana and **a dependent child or relative of a voting member system employee**. In order to be eligible, applicants must complete the application form in its entirety and return it to the IRSDA by the entry **postmark deadline, February 15, 2021**. All applications will be first screened on the basis of leadership responsibilities in community activities and school activities and on grade point average. Scholarship recipients will be selected on the basis of the number, length of commitment, and quality of leadership responsibilities in community and school activities, awards, honors, academic records, career goals and financial need. Applicants will be evaluated on a comparative basis at the sole discretion of the committee. All decisions are final. Application material and decisions of the committee shall be confidential. Acceptance of scholarship constitutes permission to use recipient's name and/or likeness for purpose of promotion. No transfer of scholarship is permitted. Applicant must plan to attend an accredited school in the fall of 2021. Recipients will be notified by mail. Family members of the Board of Directors are not eligible.

Mail application, transcript(s), & essay to: PO Box 147, Lewisville, IN 47352

(must be postmarked by February 15, 2021)

OR Email application, transcript(s), & essay to: indianarsda@gmail.com

(must be received by February 15, 2021)