



## Iowa Business Aviation Association SCHOLARSHIP PROGRAM 2021 APPLICATION FORM

**Deadline:** This application form and all other required documentation must be received by January 1, 2022. Mail to: IBAA Scholarship Program, 3505 80<sup>th</sup> St., Urbandale, IA 50322. Questions? Call (515) 802-2385 or e-mail: [iabusinessaviationassoc@gmail.com](mailto:iabusinessaviationassoc@gmail.com)  
Website: <https://www.iowabusinessaviation.org/Scholarships/>

**Required fields are indicated by an asterisk (\*).**

**Eligibility:** Students must meet these criteria to be eligible. Please initial.

1. \_\_\_\_\* I confirm that I am enrolled full-time in a college program related to aviation or aerospace in the state of Iowa.
2. \_\_\_\_\* I am a resident in the state of Iowa.
3. \_\_\_\_\* I have completed a minimum of one academic semester in an aviation or aerospace program and have a minimum of two academic semesters left to complete.
4. \_\_\_\_\* I have a minimum cumulative GPA of 3.0 or higher.

**5. \*Name:**

a. First name\*-- Middle name(s) -- Last name\*:

\_\_\_\_\_

b. If it is different than your formal name, what do you prefer to be called?:

\_\_\_\_\_

**6. \*Have you won an IBAA scholarship before?**

\_\_\_ Yes (Year: \_\_\_\_\_) or \_\_\_ No.

**7. \*Home address:** The IBAA Scholarship Program is restricted to residents of the state of Iowa.

\*Address: \_\_\_\_\_

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

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*ZIP: \_\_\_\_\_

**8. \*Primary telephone:** (\_\_\_\_\_) \_\_\_\_\_

**9. Secondary telephone:** (\_\_\_\_\_) \_\_\_\_\_ **Extension:** \_\_\_\_\_

**10. E-mail:** \_\_\_\_\_

**11. \*Date of Birth (MM/DD/YYYY):** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**12. \*What school do you currently attend?**

\*Name: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*ZIP: \_\_\_\_\_

Phone number: (\_\_\_\_\_) \_\_\_\_\_

\*What is your current GPA?: \_\_\_\_\_

**13. \*Classification in fall semester 2021:** \_\_\_\_\_  
(freshman, sophomore, junior, senior, graduate, PhD candidate, postgraduate)

**14. \*What degree(s) are you pursuing?:**

**15. \*What profession or field of employment do you wish to enter with your college degree?:**

**16. \*Anticipated year of college graduation:** \_\_\_\_\_

**17. \*List any organizations you participate, and offices or rank held if applicable:**

19a. Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Years: \_\_\_\_\_

19b. Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Years: \_\_\_\_\_

19c. Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Years: \_\_\_\_\_

**18. \*The Essay:**

Submit an essay, maximum of 500 words, outlining how and why you chose aviation or aerospace as a career path, how the financial assistance would help you, and your future career plans or goals.

**19. \*Application Process:**

Please attach the following documents with your application:

- Current resume or CV
- Current college transcripts
- Letters of recommendation (1 minimum, 2 maximum)

**20. \*Certification Statement:**

By signing my name below, I confirm that all of the information provided above and in the accompanying documents is true and correct to the best of my knowledge.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_