

IACO SCHOLARSHIP APPLICATION 2010

SCHOLARSHIP FUNDED BY DEVNET & BRUCE HARRIS & ASSOCIATES



During the 2009 Summer Board Meeting, the IACO Executive Board voted to add a \$1000 scholarship based on the best essay describing what the applicant has learned about public service from his or her sponsor. Applicants who did not receive an IACO Scholarship this year based on the regular selection criteria will be eligible for the essay scholarship.

IACO will award **two \$1,000** Scholarships for a four year college beginning the Fall of 2010 and, **two \$500** Scholarships for a two year college beginning the Fall of 2010. Additionally, **one \$1000** Scholarship for Fall 2010 will be awarded for the best essay of all remaining applicants.

Eligibility Criteria: At least a High School Graduate by June of Scholarship Year.
Only family members (Child or Grandchild) of elected or appointed Illinois County Officials (currently employed or retired) that are active dues paying members.

Application Deadline: March 8, 2010

Application Form: Complete the Application Form
The sponsor is the active dues paying member of the Illinois Assn. of County Officials. *(Either currently employed or retired). This may be either a parent or grandparent of the applicant.*

Attachment I: **Applicant's essay** Describe in at least 500 words what the applicant has learned about public service from his or her sponsor.

Attachment II: **A resume**, including an Official Transcript of grades, GPA, major award, organizations and activities, and at least one letter of support from a teacher or principal

Attachment III: **A wallet size photograph**

Return to: Mark A. Von Nida, Scholarship Chair
Madison County Clerk
157 N. Main Street - Suite 109
P.O. Box 218
Edwardsville, IL 62025
Office Phone: 618-692-6290

**Application
Deadline:
March 8, 2010**

The Criteria for Selection shall be based on the following:

- a. Scholastic ability
- b. Need
- c. Leadership and activity

Special Instructions regarding need: In the space provided on the application briefly included any circumstances which may be considered such as other children in college, medical costs, etc.

ILLINOIS ASSOCIATION OF COUNTY OFFICIALS

SCHOLARSHIP APPLICATION

Name of Applicant: _____ Date of Birth: ____/____/____ Age: _____

Home Address: _____

City: _____ State: _____ Zip: _____

High School Attended: _____

Date Graduated (or expect to graduate): _____ GPA: _____ GP Scale: (4.0 or 5.0)

School Address: _____

City: _____ State: _____ Zip: _____

College or University you plan to attend: _____

2-Year 4-Year school. Have you been accepted? _____

Degree or course in which you plan to major: _____

What is your current career choice? _____

Signature of Applicant: _____

This section is to be completed by the parent or Grandparent who is a member of IACO.

Sponsor's Name: _____ Title: _____

(Member sponsor must be current with his/her dues)

County: _____ Affiliate Organization: _____

Relationship to Applicant: _____

State reasons why you think the applicant merits consideration to receive a scholarship from IACO. If necessary, you may attach additional documentation. _____

Have you ever applied for an IACO scholarship for this or any other family member? Yes No

If yes, did the applicant receive a scholarship from IACO? (Give details): _____

List any circumstances regarding need which should be considered : _____

Signature of Sponsor: _____