

Erin K. Dowell Endowed Scholarship Form

Open to any graduate of any high school (including GED) located in Henderson, Hancock, McDonough, Mercer or Warren counties in the State of Illinois who desire to attend college, trade school or continuing education classes that would assist them with furthering their education and learning who show a financial need to meet their goals. This scholarship is open to high school seniors, college students, and adults who want to further their education. The scholarship is renewable. Financial awards will be based on need and can provide up to a full ride for eligible nominees. There is not a deadline to apply, but applications stop being accepted when funds are exhausted for the year. We encourage you to apply as soon as you are able. Contact Warren-Henderson Farm Bureau at 309-734-9401 with application questions.

Applicant

Name: _____

Address: _____

Phone Number: _____

Email: _____

Birthdate: _____

What is your county of residence? _____

Family

Parent #1 First and Last Name: _____

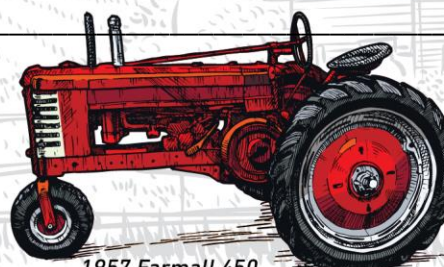
Parent #1 Occupation: _____

Parent #1 Highest Level of Education: _____

Parent #1 Address: _____

Parent #1 Phone Number: _____

Parent #1 Email: _____



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Parent #2 First and Last Name: _____

Parent #2 Occupation: _____

Parent #2 Highest Level of Education: _____

Parent #2 Address: _____

Parent #2 Phone Number: _____

Parent #2 Email: _____

Marital Status of Parents: _____

High School

Name of School: _____

Graduation Date: _____

Counselor's Name: _____

Counselor's Email: _____

Teacher Reference: _____

Teacher's Email: _____

Grade Point Average (GPA): _____

School Activities: _____

Non-School Activities: _____

Your Plans

Where do you plan to enroll? _____

When do you plan to enroll? _____



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What is your intended major/course of study? _____

Amount saved (by parents and self) for Higher Education: _____

List the scholarships, tuition waivers, and/or other financial assistance you have currently applied for, include the values of all. Also include whether you received, did not receive, or are still waiting to find out for each: _____

Estimated tuition cost for the year: _____

Estimated Room and Board costs for the year: _____

Estimated other cost(s) for the year (please break down): _____

Yearly cost of education not covered by scholarships or grants: _____

Work History

Employer: _____

Supervisor's Name: _____

Supervisor's Phone Number: _____

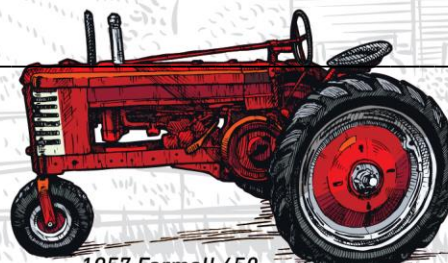
Supervisor's Email: _____

Start Date of Employment: _____

End Date of Employment: _____

Hours Work per Week: _____

Hourly Pay Rate: _____



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Employer #2: _____

Supervisor's Name #2: _____

Supervisor's Phone Number #2: _____

Supervisor's Email #2: _____

Start Date of Employment #2: _____

End Date of Employment #2: _____

Hours Work per Week #2: _____

Hourly Pay Rate #2: _____

Please share any other work experience(s) not listed above:

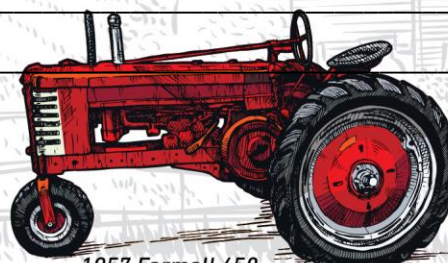
Nomination & Reference

Who nominated you for this scholarship? If self-nominated, write "self-nominated":

Name of Reference (can be nominator or other): _____

Reference Phone Number: _____

Reference Email: _____



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The following priorities will be used to determine eligibility:

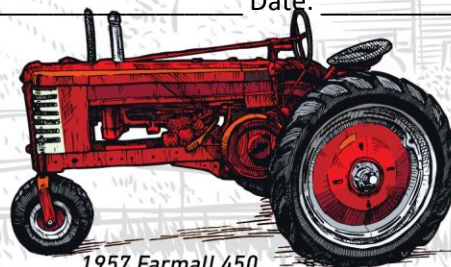
- Students who may not have other scholarship opportunities due to scholastic performance but possess the motivation to attempt and complete needed additional education training.
- Students who are unlikely to have the opportunity for further education or training without this award.
- Students who have unique or specialized educational needs not served by traditional scholarships.
- Students who have limited or lacking family support infrastructure to successfully compete for traditional scholarships.
- Students who work at a paying job to help support themselves and/or their family.
- Non-traditional students who have a desire to further their education.
- Students from Henderson County will receive priority.

Please explain why you should receive this award. Please address the parameters of eligibility (listed directly above this question) in your response:

Applicant's Signature

By signing your legal name in the space below, you are certifying that all listed information is accurate.

Name: _____ Date: _____



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