IOWA AUTO RECYCLERS ASSOCIATION SCHOLARSHIP

APPLICANT CRITERIA:

- Be a graduating high school senior or equivalent, or a college student who has been accepted to an
 accredited university, state college, community college, business or liberal arts school
- A minimum 3.0 GPA during high school or first year college.
- Applicants (or their eligible dependent/relative) must be affiliated with the lowa Auto Recyclers
 Association to participate. EITHER:
 - Be a recycling yard owner or relative of the recycling yard owner who is a direct member of the lowa Auto Recyclers. The owner of the recycling yard must be employed at the recycling yard, and not at other enterprises owned by the recycling yard.
 - "Relatives" may include a son, daughter, grandchild, son-in-law, daughter-in-law, or spouse of the owner.
 - Brothers, sisters, uncles, aunts, nieces, or nephews of the owner will not be eligible to participate unless employed in the business.

OR

- Be an employee or dependant of an employee of the member yard who has been employed for one year or more.
- Applicant must remain a degree-seeking student, enrolled at least full-time (a minimum of 12 credit hours per term).

APPLICANT GUIDELINES:

- Complete attached application.
- Enclose an official copy of the applicants' high school transcripts (in separate sealed envelope) with application.
- Include a one to two page essay on one of the following topic:

What do you think the industry of Auto Recycling will be like in the next 10 years?

- Two recommendation forms filled out from a school counselor, school official, employer or high school teacher who is familiar with the applicant.
- Applicants must remain enrolled in the same accredited four-year college, accredited university, state
 college, community college or business or liberal arts school for at least one year after accepting
 scholarship funds to be eligible for the full award.
- Obtain a letter from your parents' employer confirming date of hire with the firm. Your parent must have been or will be employed with a full member of the Iowa Automotive Recyclers for at least one year prior to application.

All candidates will be required to submit a complete application package, which includes a completed application form, transcripts, essay and two recommendation forms to: IAR SCHOLARSHIP COMMITTEE ATTN: JODI KUNDE 55 WEST 32ND STREET DUBUQUE IA 52001, you can e-mail any questions to Jodi at iarscholarship@gmail.com.

DEADLINE DATE:

The deadline for receipt for all application materials must be received by the IAR scholarship committee by midnight MARCH 15TH. Up to \$5000.00 will be awarded in scholarships for the fall term. The winners will be notified in writing and will be posted on the IAR website.

The scholarship award check will be forwarded to the scholarship recipient's school upon written certification of his/her enrollment for the fall term of the year the scholarship was granted. If the scholarship winner does not provide enrollment verification for the fall term the scholarship monies will be forfeited.

SCHOLARSHIP SELECTION:

The scholarship will be awarded based on review of the following: coursework in high school, course distribution, activities, the one page essay and recommendations. *Standardized test scores will NOT be used as a factor in the selection process*.

IOWA AUTO REYCLERS SCHOLARSHIP APPLICATION

NAME:			
NAME:(First)	(Middle)	(Last)	
MAILING ADDRESS:			
HOME PHONE:	E-MA	NIL ADDRESS:	
DATE OF BIRTH:		GENDER: MALE / FEMAL	.E
CURRENTLY ATTENDING:			
	(INDICATE HIGH SCHOOL	OR OTHER SCHOOL)	
HIGH SCHOOL HONORS, AWARDS, A	AND ACTIVITIES:		
COMMUNITY SERVICE AWARDS ANI	O ACTIVITIES:		
STATE YOUR FINANCIAL NEED, WHA	AT PORTION OF FOUC	ATION FUNDED BY YOURSE	F•
STATE TO OTT THAT THE TREED, WITH	TORMON OF LOOK	THE TOTAL DE LOCKSE	-1 •
SCHOLASTIC INFORMATION:			
ACT TEST SCORE	SAT TES	T SCORE	
RANK IN CLASS OF	CURREN	NT GPA:	
HONORS AND AWARDS (STATE NAT	URE AND YEAR OF AV	VARD OR HONOR):	
OFFICES AND DOSITIONS OF LEADER		NE ODC ANIZATION AND VEA	D FV DAND 0 40)
OFFICES AND POSITIONS OF LEADER	ASHIP (STATE NAME C	OF ORGANIZATION AND YEA	K, EA: BAND 9, 10)
WHAT ARE YOUR SHORT AND LONG	-TERM CAREER OBJE	CTIVES?	

WHAT DO YOU SEE YOURSELF DOING FIVE YEARS FROM NOW?				
NY ADDITIONAL INFORMATION WHICH MAY BE USEFUL TO SCHOLARSHIP COMMITTEE:				
CHOOL YOU WILL BE ATTENDING:				
NTICIPATED MAJOR:EXPECTED GRADUATION DATE:				
NAME OF PARENT WHO HAS BEEN EMPLOYED BY A DIRECT MEMBER OF IAR FOR AT LEAST ONE YEAR?				
START DATE?				
WHICH DIRECT MEMBER/YARD ARE YOU AFFILIATED?				
NOTE: transcripts, essay, and recommendation forms should accompany scholarship application.				
APPLICANTS SIGNATURE: DATE:				

RECOMMENDATION FORM IOWA AUTO RECYCLERS ASSOCIATION SCHOLARSHIP

Name of Applicant:		
School:		
Please state why you feel th	is applicant would be a good choice as a	recipient of this scholarship?
	commitment to his or her career?	
		Date:
Title or Position:		
#######################################	######################################	
As of t	he student listed above had a grade point	average of
ACT Test Score:	ACT Test Score:	Rank in Class:
# OF STUDENTS IN APP	LICANTS CLASS:	
Signed:	Position	