

SCHOLARSHIP APPLICATION GUIDELINES AND CRITERIA 2012-2013 ACADEMIC YEAR

 The Ice Skating Institute of America (ISIA) Education Foundation does not discriminate in academic scholarship selection on the basis of age, sex, religion, marital status, etc.

Guidelines

- ♦ Applicant must complete an official ISIA Scholarship Application form provided by the ISIA Education Foundation. No copies or outdated applications will be accepted.
- Each applicant may submit no more than one application per year; however, there is no limit to the number of applications that can be submitted by individuals from a particular facility or geographic area.
- Current post-secondary students may apply prior to starting their last academic year.
- All questions must be answered and be either printed in black ink or typed and all signatures affixed on the forms provided in order to qualify. Copies of the "Hours of Service" form will be accepted. When more than one form is used, total cumulative hours for all forms must be listed.
- Final selection will be made by the Trustees of the ISIA Education Foundation.
- Applicants will receive written notification of their results.
- All awards must be applied toward the academic year starting in the same calendar year the recipient is approved by the Board of Trustees and will be pro-rated over the length of the degree program in which the recipient is enrolled up to a maximum of four (4) consecutive years.
- ◆ The award will be sent directly to the accredited college, university, or technical school, in the United States of America, where the recipient will do his or her undergraduate work. The award will be paid only for undergraduate courses for students carrying at least the minimum number of credit hours necessary to be a full-time undergraduate student.
- Recipient(s) must use the scholarship award as stated in the guidelines.
- Award recipient(s) must furnish the following information to the ISIA Education Foundation by June15, 2012: exact name and address of the school selected/accepted, registration date and an individual photograph. Failure to furnish this material by June 15 could result in the forfeiture of the award and the subsequent awarding of the scholarship to an alternate applicant.
- Applications will only be considered once. All applicants may re-apply for subsequent award periods by submitting another complete application package.
- All selections are considered final. All applications and attachments become the property of the ISIA Education Foundation.

Criteria

- Applicant must have completed at least three (3) years of high school or equivalent, with a minimum 3.0 grade point average (based on a 4.0 system) during the last two (2) years.
- Applicant must submit an official transcript including grades through the last reporting period prior to application and an official recording of SAT/ACT scores, to the ISIA Education Foundation.
- Applicant must be a current individual or professional member of the Ice Skating Institute (ISI) and have been for a minimum of four (4) years.
- Applicant who is a teacher or instructor must be a current Professional Member of the Ice Skating Institute, teaching the ISI program at an ISI Administrative Member (rink or club). Instructor status must be verified by an ISI Administrative Member.
- Applicant must have participated in the ISI Recreational Skater Program at an ISI Administrative member (rink or club) program for a minimum of four (4) years. Applicant must have participated in ISI group classes or ISI-endorsed competitions within the last two (2) years.
- Applicant must have completed 120 hours of volunteer service, of which at least 60 hours must be in association with an ISI member facility. Service may be from more than one location. Credit for service hours will be given for service rendered from age 13 and up. (Hours of Service - Verification Form may be duplicated if necessary.)
- Applicant must submit two (2) evaluation forms. One evaluation must be from the supervisor at the site where a majority of the service hours took place. The second from an adult not associated with ice skating and not a relative of the applicant. In addition, one letter of recommendation may be included with the application.
- ♦ Application must be accompanied by a statement of 500 words or less, <u>typed</u> by the applicant explaining "Why I should receive an ISIA Education Foundation Scholarship."
- Applicant's community service, community service awards, education awards and recognition, educational goals, and competitive ice skating experience will be considered in the screening and selection process.
- Applicant must enroll and carry the minimum number of credit hours necessary to be a full time undergraduate student. Graduate students are not eligible.
- Application, including all required forms and information, must be postmarked by March 1, 2012 in order to be considered for an award for the 2012-2013 academic year.

♦ All applications are to be sent to: Scholarship Application

ISIA Education Foundation 6000 Custer Road, Bldg 9

Plano TX 75023



ISIA EDUCATION FOUNDATION SCHOLARSHIP APPLICATION

2012-2013 ACADEMIC YEAR

<u>Applicant:</u> Please complete all sections of this application. Type or print using black ink. Use N/A if question does not apply. Appearance and completeness will be considered during evaluation. <u>All sections must be completed in order for application to be considered</u>. Application must be postmarked by **March 1, 2012**.

MAIL TO: ISIA EDUCATION FOUNDATION, 6000 CUSTER ROAD BLDG 9, PLANO TX 75023-5115

I. <u>PERSONAL</u>			
A. Name:			
B. Address:			
City/State/Zip Code:			
C. Phone Number:			
E. Birth Date:	F. Social Security Nu	mber:	
G. Parent/Legal Guardians Name:			
H. Address if different from item B: _			
II. <u>EDUCATIONAL BACKGROUND</u>			
A. High School	B. Date/Expected Da	te of Graduation:	
C. Street Address/City/State/Zip:			
D. If senior, list counselor's name:			
E. Cumulative High School Grade Point	: Average (last 2 years):	Based on a	point system.
Rank in Class / (Offi	cial Transcript must be sent	to ISIA Education Fou	ndation)
F. Aptitude Test Scores:			
ACT: (Composite) SAT: (Real	ading) (Math)	(Written)	(Total)
Official form must be sent to ISIA E	ducation Foundation.		
G. School you plan to attend:			
H. Are you presently enrolled in school	other than high school?	If yes:	
I. Degree you plan to obtain and/or co	urse of study:		
J. Name of school:			
K. Address:			
L. Major:			
M. Student Activities: On a separate sh	neet list the activity and the	number of years in wh	ich you participated

N. Awards/Honors: (please list singly – use additional sheet, if necessary)

III. <u>ICE SI</u> A. Facility(i															
B. Street ac															
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C. Phone no															
E. Number															
If yes, me															
G. ISI Test								-				level p	assed.		
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H. ISI Nation						•									
Year World	2012	2011	2010	2009	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	
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APPLICANT EVALUATION FORM

2012-2013 ACADEMIC YEAR

The above named person is applying for an ISIA Education Foundation Scholarship. Your evaluation is important considering this application, and we encourage you to explain your ratings fully. All comments will remain confider will be used for evaluation purposes only. Applicant is responsible for submission of all required forms by March 1, 2012. Complete (type or print in black ink return to applicant sealed in the attached envelope. Name of Evaluator Address City State Zip Code Phone () How long have you known the applicant? Furnish information on the nature and frequency of your contacts and observation of the applicant: EVALUATION OF SOCIAL AND PERSONAL TRAITS Please rate each characteristic listed, using a scale of 1 to 10. Use N/A if not applicable. Use the reverse side of 1 to 10.	Name of Applicant: Last				First			MI	
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Address				forms by N	March 1	<u>, 2012</u> . C	omplete (type o	or print in black i	nk) and
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(Signature of Evaluator) (Date)	(Signature of E	valuator)					(Date)		_



SCHOLARSHIP APPLICANT SERVICE HOURS - VERIFICATION FORM

(One sheet required per location of service - Please machine copy form if needed.)

Name of Applicant				
Service Location				
Address				
Address Number and Street	City	State	Zip	
Supervisor				
DATE	JOB PERFORMED		VOLUNTEER HOURS	VERIFIED
	TOTAL HOURS BROUG	RS THIS PAGE HT FORWARD OTAL HOURS		
I verify that the hours stated are a	accurate, to the best of my knowledg	e.		
(Facility Manage	r/Supervisor's Signature)		(Date)	