

Dear Applicant,

On behalf of the International Association of Minister's Wives and Ministers' Widows, Inc.,(IAMWMW, Inc) we would like to thank you for your interest in this Scholarship. The (IAMWMW, Inc.) is an organization that strives for the advancement of our great nation by sharing our diverse culture with all people.

Our organization is based on Reaching out, Reclaiming and Retaining perspectives. To that end, we consider the education of children our top priority. We also understand that finances can be a hindrance to many young people getting through their first year of college. Therefore, all of our scholarships are geared towards children/grandchildren of Minister's and of (IAWMMW, Inc) to assist deserving college-bound students. We are happy to announce that we are awarding scholarships to graduating high school seniors who are entering an accredited college or university in the fall of 2010.

1. To be eligible, the student must be a **graduating high school senior, class of 2010.**
2. To make the application and selection process go as smoothly as possible, please complete all the required information on the *Applicant Information Sheet* and return it, along with any required documents, to the committee **postmarked no later than June 18, 2010.** Winners will be notified by letter no later than **31 Dec 2010.** An award confirmation letter will be sent.
3. Please pay close attention to the required items. Failure to provide the proper documents may result in disqualification from consideration even though you may meet all the criteria. ***An important part of your education is meeting guidelines set forth by various agencies. These agencies set guidelines for a purpose, and you will learn that failure to meet those guidelines often result in missed opportunities. Therefore, there will be no exceptions to our rules nor will there be any extension of the deadline date.***
4. **Actual funds will be distributed upon receipt of a copy of the registration for class from the institution the winner is attending.** If selected to receive a scholarship, it is mandatory that the student be enrolled and verification of enrollment will be needed.

## **Scholarship Application Requirements**

**\*Applicants will not be evaluated based on race, creed,  
Ethnic origin, gender, or religious preference.**

The packet requirements are as follows:

- Copy of High School Transcript** inclusive of grades 9 through 12 (*Through May 2010*)
- Copy of ACT/SAT Scores**
- Copy of Letter of Acceptance/Intent** from the college/university attending
- Applicant Personal Information Sheet** completed and signed by student and parent/guardian
- Picture of Yourself (Current)**
- Letter of recommendation from the (IAMWMW, Inc) wife/widow that is recommending you for the scholarship 150 words**
- Letter of recommendation from your Pastor/Youth Minister to verify and acknowledge activities that you are involved in at your church.**
- Resume of Community Involvement**
  
- Essay:** Write a brief essay *explaining your plans for the future, including goals and ambitions.*
  - Typed and Double Spaced, 12 Pitch Font
  - 200 to 300 words in length
  
- Letter of Recommendation** from a teacher or counselor
  - Typed and Double Spaced, 12 Pitch Font
  - Limited to 150 words

Please submit documents to:

**International Association of Minister's Wives and Minister's Widows, Inc.  
2045 Stonebridge Drive  
Biloxi, MS 39532  
(228)-388-3026**

**Must be postmarked by June 18, 2010**

//Signed//  
Ms. YoLanda G. Wallace  
Chairperson, Commission on Student Affairs

**\*Remember all entries must be legible and clear**

**APPLICANT PERSONAL INFORMATION SHEET**

**(Please Type or Print Legibly)**

**Student Information**

***LAST NAME*** \_\_\_\_\_ ***FIRST*** \_\_\_\_\_ ***(M.I.)*** \_\_\_\_\_

***STREET ADDRESS*** \_\_\_\_\_ ***TELEPHONE*** \_\_\_\_\_

***Cell Phone*** \_\_\_\_\_ ***Other contact*** \_\_\_\_\_ ***Email address*** \_\_\_\_\_

***CITY*** \_\_\_\_\_ ***STATE*** \_\_\_\_\_ ***ZIP CODE*** \_\_\_\_\_

**High School and Scholastic Information(Counselor Please Fill Out)**

***High School*** \_\_\_\_\_ ***Graduation Date*** \_\_\_\_\_

***\*High School Cumulative Grade Point Average (9<sup>th</sup> - 12<sup>th</sup> Grade)*** \_\_\_\_\_

***\*ACT Score (0 - 36)*** \_\_\_\_\_ ***Test Date*** \_\_\_\_\_

***\*SAT Score (0 - 1600)*** \_\_\_\_\_ ***Test Date*** \_\_\_\_\_

**College/University Information**

***College you are attending*** \_\_\_\_\_  
***(Verification of acceptance must be attached to application)***

***College address*** \_\_\_\_\_

***Phone Number*** \_\_\_\_\_

*Anticipated Major* \_\_\_\_\_  
Extra-curricular activities, school/Community

Hobbies/Skills  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By signing below the following is understood:**

1. I/We authorize the International Association of Minister's Wives and Ministers' Widows, Inc. (Student Affairs) to verify any and all information provided on this questionnaire as deemed necessary to make a scholarship award determination.
2. I understand that the information provided will be used to select me for a possible scholarship from the International Association of Minister's Wives and Ministers' Widows, Inc., (Student Affairs).
3. I agree to abide by the rules of the scholarship selection committee and understand that their decision is final.
4. I certify that the information provided with this application is true to the best of my knowledge.

All provided information is confidential and will be only used for the purpose of making a scholarship selection. This information will not be shared with anyone without the express written permission of the applicant or their parent or legal guardian. All information will be destroyed after awarding of the scholarships. Provided information will not be returned to applicant.

\_\_\_\_\_  
Student Signature/Date

\_\_\_\_\_  
Parent/Guardian Signature/Date