

ISLMA Scholarship Award Application Form

Name:

Current Position:

Day Phone Number (including area code):

Evening Phone Number (including area code):

Email Address:

Mailing Address (Street, City, State and Zip Code):

Name and address (Street, City, State and Zip Code) of College or University you are attending:

Current G.P.A. (on 4 pt. Scale)

Submit a concise written statement of your overall thoughts concerning two (2) of following:

- Professional goals
- Philosophy of Librarianship
- Objectives as a school librarian
- How you envision meeting library information standards

Applicants who are awarded a scholarship will be required to send a copy of the bill showing tuition and fees paid and a copy of their grade report to ISLMA following the completion of the course in order to be reimbursed.

Signature of Applicant:

Date: