



HEARTLAND REGION  
SCHOLARSHIP APPLICATION

Deadline: January 31, \_\_\_\_\_

Applicants must be a member of the Heartland Region. All applications should be typed or clearly printed. Only complete applications containing responses to all items will be considered. Rules for the scholarship are contained in the Heartland Region Policies and Procedures in the Region Officers' Notebook and are attached to this application form.

Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
EGA Member Number: \_\_\_\_\_ Primary Chapter: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

DESCRIPTION OF PROJECT \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOCATION OF PROJECT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROJECT START DATE: \_\_\_\_\_ PROJECT END DATE: \_\_\_\_\_  
(must be completed within one year of scholarship award)

HOW WILL THIS EXPERIENCE BENEFIT YOU?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

02/2013  
Section IV-G-1a

EGA EXPERIENCE

G-2b

Chapter: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Region: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

National: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand all the conditions of the scholarship as outlined on this form and attached rules and agree to abide by them if I am a Scholarship recipient. I have not previously been awarded the Heartland Region Scholarship. I also understand that if I do not fulfill the terms of this agreement, I must repay the scholarship in full upon demand.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application to the Heartland Region Education Chair:

05/2016  
Section IV-G-1b