



Illinois Federation of Business Women-Metro East  
Community Scholarship Program  
PO Box 993  
Edwardsville, IL 62025

**IFBW-ME Vision:** Illinois Federation of Business Women-Metro East (IFBW-ME) is the most powerful organization in the United States for working women. IFBW-ME provides networking opportunities, resources, career positioning, educational programs and visibility for its members nationwide. For more than 80 years, IFBW-ME has worked on behalf of women and economic equity in the workplace. With a powerful network of members and 2,000 Local Organizations across the country, IFBW-ME means business for working women. The Illinois Federation of Business Women's Foundation promotes equity for working women nationwide through education, information, and research.

**IFBW-ME Mission:** IFBW-ME Illinois advocates professional and personal growth, leadership development and participation, equity and economic self-sufficiency for working women through education, legislation and networking.

**Amount of Scholarship:** IFBW-ME will be awarding one \$1,000 Community Scholarship to woman who is interested in furthering her education at the college/vocational level.

**Scholarship Eligibility:**

- Woman who is resident of or employed within the boundaries of the Edwardsville Community Unit School District # 7, the City of Edwardsville, or the Village of Glen Carbon.
- Intend to continue education/return to school/seek a degree by attending a college/university or a business/vocational school.
- At least age 23.

**Application Deadline:** Completed applications due back no later than **April 13, 2022** to IFBW-ME, P.O. Box 993, Edwardsville, IL 62025. Please contact Colleen Seiffert at 618-806-5585 or [colleen.seiffert@prodigy.net](mailto:colleen.seiffert@prodigy.net) with questions.

**Applicant Information:**

- 1. Name of Applicant: \_\_\_\_\_
- 2. Address: \_\_\_\_\_
- 3. Telephone: \_\_\_\_\_ Email: \_\_\_\_\_
- 4. Date of Birth: \_\_\_\_\_ Marital Status:  Single  Married
- 5. Are you a United States Citizen?  Yes  No
- 6. Are you a resident of Edwardsville Community Unit School District # 7, the City of Edwardsville, or the Village of Glen Carbon?  
 Yes  No
- 7. Are you employed within the boundaries of the Edwardsville Community Unit School District # 7, the City of Edwardsville, or the Village of Glen Carbon?  
 Yes  No
- 8. Name of Post-Secondary School you expect to attend: \_\_\_\_\_
- 9. Address of School: \_\_\_\_\_
- 10. Admissions Department Contact: \_\_\_\_\_
- 11. Field of Study: \_\_\_\_\_

**Household Information:**

- 12. Are any members of your family currently associated with the Metro East Business Women's Club's Organization?  Yes  No  
  
If so, please give name & relationship: \_\_\_\_\_
- 13. Please provide a copy of your Free Application for Federal Student Aid (FAFSA) or information required to complete the FAFSA report. Required information can be found at <http://www.fafsa.ed.gov/>.

**Essay Questions:**

14. Why do you believe you are the best recipient of the Metro East Business Women's Club Community Scholarship?

15. How will your selected major/profession further the betterment of women in the workforce?

**Additional Information:**

Please use the area below to provide any additional information you feel would be beneficial to your application.

**Educational Level:**

**Work History:**

16. List your work history, beginning with your most recent job / position and listing, in order, previous jobs / positions:

Company: \_\_\_\_\_

Position Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Full Time     Part-Time

Company: \_\_\_\_\_

Position Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Full Time     Part-Time

Company: \_\_\_\_\_

Position Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Full Time     Part-Time

Company: \_\_\_\_\_

Position Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Full Time     Part-Time

17. Along with this application please submit **one Letter of Reference** from a category listed below:

- Letter from peer who has known me a minimum of five (5) years
- Letter from current/prior employer
- Letter from religious leader
- Letter from current/prior educational instructor

I verify that all information provided in this scholarship application is accurate to the best of my knowledge. I also agree to attend a monthly meeting of the Metro East Business Women's Club to receive my award certificate should I be the scholarship recipient.

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Signature of Applicant

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Date