

ISBA KIDS
Scholarships
Another member benefit



Bringing Community Service Home

ISBA Scholarships @ \$750 each

For current year High School Graduates

who are children of full time employees at ISBA Member Stations.

Who may apply - eligibility requirements for a \$750 scholarship

*A high school senior, who upon graduation will attend any post secondary institution (vo-tech, two-year community college, four-year college or university (Private or public; in state or out-of-state)

*Major or field of study is not a determining factor.

*Station General Manager must certify that applicant is a child of a full-time station employee (in continuous full time employment at least since last July 1).

Return to Idaho State Broadcasters Association, 1674 Hill Rd., Ste. 3, Boise, ID 83702.

isba@qwestoffice.net

Must be postmarked or emailed by March 15. We will not accept faxed applications

*Attach the essay requested under the section titled "Essay".

YOU

PLEASE TYPE or PRINT LEGIBLY

Applicant's Name _____ Social Security Number _____

Address _____ Tel No (_____) _____ / _____

City _____ State _____ Zip _____ e-mail: _____

Parents _____ Tel No (_____) _____ / _____

Address _____ City _____ State _____ Zip _____

Employed full time at which ISBA Member Station? _____ For how long _____ years/mos.

Your School

You will graduate this coming spring from which High School? _____

Post-secondary school you will attend next fall _____

School address _____ School Tel No (_____) _____ / _____

Your Activities

List school and community activities and clubs and offices you have held. _____

List honors and other accomplishments _____

Essay

Please submit up to TWO typewritten pages (double spaced) addressing the following:

- *How have you benefited from your mother or father being in the broadcast business?
- *What career do you plan to pursue, and why did you select it?
- *In what activities have you participated related to your career choice?
- *What activity or affiliation have you found to be the most rewarding and why?

I certify the information on this application and attachments is true and correct to the best of my knowledge.

Applicant's Signature _____

Station/General Manager Certification

I certify this applicant is the son or daughter of an employee who has been employed full time at this station since last July 1.

Name _____ / Station _____ (Please type) (Signature)

The Selection

The ISBA Board will review the applications and essays and respond to applicant by May 30. Payment will be made to the post-secondary institution.



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1674 Hill Rd., Ste. 3, Boise, ID 83702 * (208)345-3072 * FAX (208)343-8046
Web site: www.idahobroadcasters.org * e-mail: isba@qwestoffice.net