

**Kim Bailey and Sandra J. Chandler Memorial
Scholarships
(Iowa State University Club of Kansas City)**

One award of \$1,000 (renewable at \$500) and one for \$500 (renewable at \$250) is available for the Kim Bailey and Sandra J. Chandler Memorial Scholarships, respectively, to a first-year student from a high school in the Kansas City metropolitan area. While the same applications will be used for each scholarship, the applicant will be eligible for only one scholarship. Students must have completed the FAFSA and be admitted to Iowa State University. Students also must rank in the top 25 percent of their high school class. Selection will be based on leadership capabilities, academic achievements, character, personality and financial need. To remain eligible for renewal, the student must maintain a 2.50 GPA at ISU.

Deadline: April 30, 2007

Complete and mail FAFSA by March 15

**The completed application, along with a certified
high school transcript, should be sent or emailed to:**

Joel A. Sieren
7612 N. Nodaway Avenue
Kansas City, MO 64152
(816) 454-1241 (work)
jsieren@gmail.com

APPLICATION DEADLINE: APRIL 30

Student Name _____ (Last) _____ (First) _____ (MI) SSN _____

Present Address _____ Phone Number _____

City _____ State _____ Zip _____

Email address _____

Current High School: _____

Class Rank: (indicate total number in class) _____ SAT and/or ACT _____

Parent's/Guardian's Name(s) _____
Occupation(s) _____ Employer(s) _____

Current Number in Household: _____

Activities/Employment/Honors & Awards

List your membership and participation in the following areas. Please state the role you played in each activity or organization. Include date(s) of participation. (Attach additional page if necessary)

School Activities
(clubs/organizations/sports): _____

Community Activities: _____

Paid & Volunteer Positions: _____

Honors & Awards Received (indicate scholarships already accepted and amounts):

Academic Achievements: _____

Educational Goals: _____

I, the undersigned, give permission to the Iowa State University Financial Aid Office to release and requested information to the Alumni Club Scholarship Chair

Signature _____ Date _____

Application Deadline: April 30

-----Office Use Only-----

entry _____ major _____ s/c gpa _____ rank _____ % _____
transfer _____ act/sat _____ credits _____ need _____ verify complete
domino

