317-824-0940 Fax: 317-429-1270 director@iabo.com

Herman Darlage Memorial Scholarship Application

Materials must be received by **July 15, 2024** to be considered. Applications should be submitted to: Kenneth Seal, Scholarship Chair, City of Greenwood, 300 S. Madison Ave., Greenwood, IN. 46142 Phone: (317) 881-8698 Email: sealk@greenwood.in.gov.

SCHOLARSHIP IS OPEN TO ALL QUALIFIED CANDIDATES

Name:		
Address:		
Phone:		
Email:		
High School or College Applicant is Currently Attending:		
Schools Address:		
Month/Year of High School Graduation:		
List colleges you have applied to:		
List college(s) you have been accepted to:		
List major(s) or interests you consider participating in during your college experience:		
Is a friend or relative an Indiana Association Building Official member? Yes ☐ No☐		
If yes please list the members name and jurisdiction:		
Please describe your relationship with the member:		
Please Answer the Following Thoughtfully.		
List all academic awards and honors:		
List all extracurricular activities:		
List all volunteer/community involvement and hours:		
List any other information desired:		
In 250 words or more; describe what brought you to this point in your life and your desired future self		
and world.		
Please List three Personal References		
References may be contacted		
Personal Reference #1		
Name:		
Address:		
Email:		
Phone:		
Position/Title:		
Relationship to Applicant:		

Personal Reference #2

Name: Click or tap here to enter text.

Indiana Association of Building Officials, Inc.

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Address:	
Email:	
Phone:	
Position/Title:	
Relationship to Applicant:	
Personal Reference #3	
Name:	
Address:	
Email:	
Phone:	
Position/Title:	
Relationship to Applicant:	
**Please attach high school t	ranscripts for 9 th grade through at least the 1 st semester of your senior
-	year.
NOTE: If the applicant is cur	rently enrolled in college, the college <i>and</i> high school transcripts must
NOTE: II the approach is the	be attached/identified with this form.
	be attached/identified with this form.
Dy printing and name	salaw the arminent and narent/quardian advantuladge the applicant's
	pelow, the applicant and parent/guardian acknowledge the applicant's
	oughtfulness and honesty in the above responses.
Signature of Applicant:	Date:

Date:

Signature of Parent/Guardian:

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