

1.B. List how much you expect to earn from positions in 1.A.:

2. Do you anticipate completing any additional internships before you graduate? _____

If so, please list them:

3. List all extra curricular activities:

IV. References

Give the names and addresses of two academic references.

1. _____
Name Street City, State Zip Code

2. _____
Name Street City, State Zip Code

V. FINANCES

- 1a. Anticipated cost for the school year: _____ - _____
 1b. (beginning month/year) (ending month/year)

DESCRIPTION		COST ESTIMATE
DIRECT EXPENSES	Tuition & Fees	\$ _____
	Books & Materials	\$ _____
INDIRECT EXPENSES	Rent, Utilities, Phone	\$ _____
	Food	\$ _____
	Personal Expenses	\$ _____
	Transportation	\$ _____
	Other	\$ _____
TOTAL		\$ _____

2. How do you plan to finance your graduate education?

Self \$ _____ Family \$ _____ Scholarships \$ _____ Loans \$ _____

Other \$ (Specify) _____

3. List other scholarships for which you have applied.

4. How was your undergraduate education financed? Self \$ _____

Family \$ _____ Scholarships \$ _____ Loans \$ _____

Other (specify) \$ _____

Amount still outstanding? \$ _____

5. If you should not receive this fellowship, how do you plan to finance the remainder of your Program? _____

6. Explain any special circumstances: _____

VI. Briefly answer the following questions.

1. Describe your best and most challenging experiences in your current program:

2. What impact has the Celia M. Howard Fellowship had on your education and personal life this year?

3. Why are you deserving of an additional Celia M. Howard Fellowship?

4. How do you plan to fulfill your obligation to the Celia M. Howard Fellowship Committee after graduation?

5. Have you become involved in any Illinois Federation of Business Women's Clubs (IFBWC) related activities such as joining a Local Organization, or speaking at any IFBWC or other related meetings since receiving your Fellowship?

If so, please describe them: _____

V. STATEMENT OF PURPOSE

The purpose of the Celia M. Howard Fellowship is to provide financial assistance to Illinois Women in obtaining a degree that will enable the recipient to pursue a career in one of the Following areas:

1. Some form of government service, in diplomatic services, international relations or related Careers, the United States or a foreign country.
2. Law enforcement, court administration and auxiliary services, correctional institutions, Community-based programs or criminal justice planning agencies.
3. Law.

I understand that I am required to inform the Committee of any other scholarships and the amount that I receive.

I understand I am required to send a progress report of my educational and career path by November 15 of each year for five (5) years immediately following the awarding of a Fellowship to the Chair, Celia M. Howard Fellowship Committee, Fayrene Wright, 804 E. Locust St. Robinson, IL 62454

I further agree that my name and photograph may be used for publicity purposes and that, when possible, I will make myself available for programs about the Fellowship and my career as a recipient of the Celia M. Howard Fellowship.

I have read this application carefully and have full knowledge of the requirements of the Fellowship. The information supplied by me on this application and its supporting documentation is true and correct to the best of my knowledge.

Signature: _____ Date: _____

REFERENCE FORM

CELIA M. HOWARD FELLOWSHIP

Offered by

THE ILLINOIS FEDERATION OF BUSINESS WOMEN'S CLUBS

For Study at

(Institution)

TO: _____ DATE: _____

Your name has been given as a reference by:

Name _____ Address _____

who has made application for a Celia M. Howard Fellowship. This Fellowship is awarded by the Illinois Federation of Business Women's Clubs to Illinois Women for graduate study leading to one of the following degrees:

Master of Arts in Law and Diplomacy, Fletcher School of Law and Diplomacy, Medford, MA

___ Master of International Management, American Graduate School of International Management,
___ Glendale, AZ

Paul Simon Public Policy Institute, Carbondale, IL

Law, University of Illinois, Champaign, IL

This applicant is pursuing the degree that is checked.

After completing this form, please return it to the Chairman of the Fellowship Fund Committee. Your report will be treated in strict confidence. Late references may jeopardize an applicant's eligibility.

MAIL BY NOVEMBER 15th TO:

Fayrene Wright
804 E. Locust St.
Robinson, IL 62454

State below your opinion of the qualifications of the applicant for this Award. Your statement should include your knowledge of the applicant's:

1. Ability to do academic work of high quality
2. Emotional stability
3. Sense of responsibility
4. Initiative and leadership abilities
5. Ability to work well with people.

If you need more space, please use a separate sheet.

Date _____ Signed _____
Position or relationship to Applicant _____ Address _____

Telephone No. _____

RELEASE OF ACCESS TO THIS LETTER OF RECOMMENDATION

The applicant must complete and sign the following statement before submitting this form to the recommender. This request is in compliance with Federal Law P. L. 93-380 (Family Educational Rights and Privacy Act of 1974).

I waive my rights of access to this letter of recommendation.

I do not waive my right of access to this letter of recommendation

Signature of applicant Date

Name of Candidate: _____
PLEASE PRINT Last First Middle

Applicant for (Institution) _____

Celia M. Howard Fellowship Checklist

Mail completed application with transcript by November 15th to
Fayrene Wright, Chair

Mail reference forms to individuals listed in Section V ensuring they
know it must be received by Chair Fayrene Wright by November 15th.