

## MEMORANDUM

**TO:** The Scholarship Counselor

**FROM:** The Utah Association of Independent Insurance Agents (UAIIA)

**DATE:** January 1<sup>st</sup>, 2010

The Utah Association of Independent Insurance Agents (UAIIA) is offering a minimum of three \$1,000 scholarships in 2010 to Utah high school seniors who have maintained at least a 3.0 GPA and are active in extra-curricular activities through their school, church, community or work. In 2009 UAIIA awarded ten scholarships.

One scholarship will be awarded to a student pursuing an insurance career, the others to students pursuing insurance or business degrees.

Financial need by applicants may also be considered. If desired, the student may return the financial information form along with the application. If this form is used, any information disclosed will be kept confidential.

A transcript of the student's grades must be received by the deadline given below. If it is school policy to mail transcripts separately, it is the applicant's responsibility to see that these transcripts are received at the UAIIA office. Applications without transcripts of grades will not be considered. In addition, a recent photo should be included with the application. This photo will not be returned to the applicant. It may be used for news releases or for publicity articles should your student receive a scholarship.

We hope you will encourage all students who are eligible, to apply for one of these scholarships.

Applications (including transcripts) must be received or postmarked no later than March 31, 2010 at the office of the Utah Association of Independent Insurance Agents, 4885 South 900 East, Suite 302, Salt Lake City, Utah 84117. Please feel free to contact us with any questions at (801) 269-1200.

This application is also available on our website at [www.uaiia.org](http://www.uaiia.org). Click on the scholarship link.

# UAIIA \$1,000 SCHOLARSHIP APPLICATION

## PERSONAL INFORMATION

*(Please type or print)*

Full Name (last name first) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ SEX: M \_\_\_\_\_ F \_\_\_\_\_

NAME OF PARENT OR LEGAL GUARDIAN \_\_\_\_\_

*If parent or legal guardian's address and telephone number is different from yours, please complete the section below.*

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

### **EDUCATION HISTORY**

PLEASE LIST ALL SCHOOLS YOU HAVE ATTENDED BEGINNING WITH THE MOST RECENT

INSTITUTION	CITY, STATE	(MONTH & YEAR) ATTENDANCE FROM	TO	GRAD. DATE

What college or university do you plan to attend?

First choice \_\_\_\_\_

When will you enroll? \_\_\_\_\_

Second choice \_\_\_\_\_

What will your major be? \_\_\_\_\_

### **Essay Questions**

**PLEASE ANSWER THE FOLLOWING QUESTIONS ON A SEPARATE SHEET AND RETURN ALONG WITH THIS APPLICATION FORM.**

A. Do you have a family member presently working in the insurance industry? If yes, please Give details.

yes \_\_\_\_\_ no \_\_\_\_\_

B. Are you planning to pursue a career in insurance? yes \_\_\_\_\_ no \_\_\_\_\_

If you answered 'yes' to question B, please answer the following questions in essay style:

1. Explain why you are pursuing an insurance career.
2. How will your selected major prepare you for an insurance career?
3. Why do you feel you should receive a UAIIA scholarship?
4. What are your three top priority goals today?
5. What do you want to be doing six years from now?

If you answered 'no' to question B, please answer the following questions in essay style:

1. Explain why you are pursuing your chosen career.
2. How will your selected major prepare you for a successful career?
3. Why do you feel you should receive a UAIIA scholarship?
4. What are your three top priority goals today?
5. What do you want to be doing six years from now?

Please attach and return along with this application form the following:

1. A list of special community or school activities in which you have participated. List all honors received in high school. (Please do not send original copies of awards you have received.)
2. Answers to the above essay questions.
3. Two letters of reference (employers, teachers, etc.)
4. A recent photo of yourself. (Photo will not be returned.)

Applicants will be judged on content and quality of application. Applications will not be considered if pages are not attached together. Finalists will be asked to attend a personal interview.

All applications must be received or postmarked no later than March 31, 2010 – No exceptions made.  
Mail application to: UAIIA, 4885 South 900 East, Suite 302, Salt Lake City, Utah 84117.

# Confidential Parent/Guardian Financial Information

(OPTIONAL)

If consideration for financial need is desired, complete this form and return with application.

Father's income before taxes \$ \_\_\_\_\_

Mother's income before taxes \$ \_\_\_\_\_

Gross income (total of above) \$ \_\_\_\_\_

Total market value of home \$ \_\_\_\_\_

Amount of unpaid mortgage \$ \_\_\_\_\_

Value of bank accounts \$ \_\_\_\_\_

Value of other investments \$ \_\_\_\_\_

2009 medical and dental expenses not paid by insurance \$ \_\_\_\_\_

Emergency expenses (flood damage, etc.) \$ \_\_\_\_\_

Do you own a business or farm? \_\_\_\_\_

If so, what is the market value? \_\_\_\_\_

Number of dependents (excluding mother and father) \_\_\_\_\_

Number of dependents attending college in 2010-2011 \_\_\_\_\_

Any unusual circumstances, please explain in the space provided below:


Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

**Confidential Student Transcript Information for the  
Utah Association of Independent Insurance Agents  
\$1,000 Scholarship**

TO THE COUNSELOR: Please fill out this page and return it along with the applicant's transcripts for grades 9, 10, 11, and 1<sup>st</sup> semester of grade 12, to the Utah Association of Independent Insurance Agents, 4885 South 900 East, Suite 302, Salt Lake City, Utah 84117.

Applications and transcripts postmarked after March 31, 2010 will not be considered.

FULL NAME (last name first) \_\_\_\_\_

APPLICANTS GRADUATION DATE \_\_\_\_\_

COUNSELOR'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF HIGH SCHOOL \_\_\_\_\_

APPLICANT'S RANK IN GRADUATING CLASS IS EXACTLY \_\_\_\_\_

OR APPROXIMATELY \_\_\_\_\_ IN A CLASS OF \_\_\_\_\_ STUDENTS

Please circle the percentage that indicates your overall rating of this student compared with others in the graduating class. Consider citizenship, personality, group acceptance and social behavior.

1%    5%    10%    15%    20%    30%    50%    Other \_\_\_\_\_

The applicant's accumulative grade point average for grades 9 to present is \_\_\_\_\_

Please fill in the appropriate percentages for the applicant's achievement on the most recent ACT tests completed:

ENGLISH	MATH	SOCIAL SCIENCE	NATURAL SCIENCE	COMPOSITE PERCENTILE

Date tested \_\_\_\_\_

Please make any personal comments about this student on a separate page. Thank you for your assistance.