

INDIANA SOCIETY OF PROFESSIONAL LAND SURVEYORS, INC.

3502 Woodview Trace Ste 300 • Indianapolis, IN 46268
Phone: 317-454-8309 • Fax: 317-280-8527 • scholarships@ispls.org

**INDIANA PROFESSIONAL LAND SURVEYORS FOUNDATION
SCHOLARSHIP APPLICATION**

PLEASE CHECK WHICH SCHOLARSHIP THIS APPLICATION IS FOR: (may check multiple)

- Indiana Professional Land Surveyors Foundation Benchmark Scholarship
- John G. McEntyre Endowment Scholarship (Purdue University Only)
- Peggy Archer Memorial scholarship (Vincennes University Only)
- Purdue University Northwest Scholarship (PU Northwest Only)

Legal Name: _____ School Attending: _____

Home Address: _____ Campus Address: _____

City, State, Zip: _____ City, State, Zip: _____

Home Phone: _____ Campus Phone: _____

Mobile Phone: _____

Applicant's E-mail Address: _____

Education Information:

High School Attended: _____ Year Graduated/ GED: _____

College/Vocational: _____ Years Attended: _____

Area of Study: _____ Degree Obtained: _____

Employment Information (Starting with the most recent experience)

Employer: _____ Position: _____

Supervisor Name: _____ Phone Number: _____

Reason for Leaving: _____ Dates of Employment: _____

Employer: _____ Position: _____

Supervisor Name: _____ Phone Number: _____

Reason for Leaving: _____ Dates of Employment: _____

Have you ever been convicted of a Felony: _____ YES _____ NO

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(Please attach additional sheets if necessary.)

Write a brief paragraph about the type of career in the land surveying profession which you hope to pursue.

Are there people who have influenced your decision? Who and in what ways?

Write a brief paragraph setting out some positions or experiences you have had in high school, college, church, club work, and elsewhere which you think will help qualify you for future leadership and responsibility.

Current Grade Point Index: _____ Expected Graduation Date: _____

Do you wish to have this application sent to ISPLS Chapters for consideration of additional scholarships?
_____ Yes _____ No

If I am selected for a scholarship, award or prize, I authorize the University to release my name, major and hometown to the donor(s) and confirm that all criteria for selection were met. _____ Yes _____ No

By signing this form and submitting this application I attest to the accuracy and completeness and hereby authorize the Scholarship Committee of the Indiana Society of Professional Land Surveyors, Inc. to review and verify the accuracy of any and all information provided on or in support of this application.

Signature: _____ Date: _____