



NAIW International Legacy Foundation

Scholarship Application

The NAIW International Legacy Foundation is a 501(c)3 insurance trust dedicated to the development of educational programs for insurance professionals and to further the education of its members by funding various opportunities. The Legacy Foundation was formed in 2006 as the philanthropic arm of the International Association of Insurance Professionals.

Submission Guidelines

- All applications and accompanying documents must be typewritten, submitted within the specific award period by the deadline date,
- Submit detailed documentation supporting the course/registration for which the scholarship is requested. Two scholarships will be awarded in the amount of \$500 each
- No late or incomplete applications will be accepted.

Qualification Criteria

- Applicants must have been in insurance or related fields for a minimum of 5 years
- an active member of IAIP for a minimum of 2 years.
- Scholarships will only be awarded for education programs thru IAIP or other entities such as CPCU, National Alliance, colleges and universities. Scholarships will not be considered for participation at IAIP Conventions, Conferences, or meetings,
- Winners of the Scholarship should send proof of Enrollment in the education program of their choice.

Application Criteria

- All submissions must be complete and on time. No late or incomplete entries will be accepted.
- Applications will be reviewed by the Legacy Foundation Board of Directors.
- Scholarships will only be awarded for programs/events occurring after the decision announcement date.
- Proof that awards have been used for the intended purpose (i.e. evidence of course completion, receipts for educational materials, etc.) will be required
- Scholarship recipient agrees to the use of her or his name by the Legacy Foundation for promotional use, including optional photo use

Application Timeline

- Application Submission Deadline: Scholarship applications will be accepted until January 15 at 11:59 p.m. EST
- Scholarship Selection: All scholarship applicants will be notified of the selection decision by February 25.
- Scholarship Funds: Funds will be distributed by February 15.

Submit all application materials via the online form at:

<https://naiwlegacyfoundation.org/scholarships/legacy-foundation-scholarship-application/>

Email completed application to naiw.legacy.foundationjune@gmail.com

QUESTIONS? Please contact Legacy Foundation Chairman, June Taylor, with questions@ june.taylor@wilkinsonins.com 615-813-9801

APPLICATION CHECKLIST

Only complete applications will be reviewed by the board of directors. All sections must be completed.

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Section 1: Contact Information

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Section 2: Scholarship Information

(including detailed documentation supporting the costs for the scholarship being requested)

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Section 3: Professional Development

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Section 4: IAIP Involvement

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Section 5: Employment History

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Section 6: Professional Goals

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Section 7: Application Attestation

SECTION I – CONTACT INFORMATION

Name _____

Designations _____

Mailing Address _____

City, State, Zip _____

Email _____

Cell/Home Phone _____ **Work Phone** _____

Membership Information

Local Association

Local Association Name _____

Member at Large

State _____

Region _____

IAIP Join _____

Date _____ **Industry Join Date** _____

SECTION II – SCHOLARSHIP INFORMATION

Scholarship Requested _____

i.e. course title,

Institution or Sponsoring Organization _____

i.e. IAIP, industry organization, educational institution

Program/Event Date(s) _____

Have you applied for and/or received a roz horton scholarship for the same purpose?

	Yes		No

SECTION III – PROFESSIONAL DEVELOPMENT

Degrees and designations earned or anticipated: List any Insurance, Risk Management or Actuarial Science degrees or designations that you have earned or anticipated.

Degree or Designation	Date Earned or Anticipated Completion Date	Institution or Sponsoring Organization

SECTION IV – IAIP INVOLVEMENT

Leadership: List the IAIP leadership positions held **within the last five (2) years**. Options include serving or chairing a Local, Council, Regional or International Committee.

Position:	
Dates:	

Position:	
Dates:	

Event Participation: List the IAIP event participation **within the last twoe (2) years**. Options include Council Meetings, Regional Conferences or International Conventions.

Event:	
Date(s):	
Event:	
Date(s):	

SECTION V – EMPLOYMENT HISTORY

Current employment status:

☐
☐
☐

Full time

Self-employed

Retired

☐
☐

Part time

Seeking Employment

Current Employer:

Current Title:

Role/Major Responsibilities:

WORK EXPERIENCE

Indicate additional insurance employment

Dates of Employment	Employer	Position(s) Held

REFERENCE

Include letter of recommendation from one (1) business, personal or IAIP reference.

Name	Business or Personal Reference	Phone	Email

Reference letter included?

☐ Yes ☐

SECTION VI – PROFESSIONAL GOALS

What are your professional goals? How will receiving this scholarship help you to obtain these goals?

Limit response to 150-300 words.

SECTION VII – APPLICATION ATTESTATION

I affirm that the information provided is true, to the best of my knowledge. I understand that the information in my application will be shared with the Scholarship Evaluation Committee for the purpose of evaluating my application. My scholarship application information will not be shared with or given to any third party. If awarded a scholarship, I give permission to publish my name as a scholarship recipient unless I notify the Foundation within 15 days of receiving notification of a Scholarship award.

Applicant's Signature (*electronic signature is acceptable*)

Date