### MARIE B. BOWEN MEMORIAL SCHOLARSHIP

### **OFFERED BY:**

### DELAWARE COUNTY EXTENSION HOMEMAKERS CLUBS

Devoted to Home Economics, Marie B. Bowen was our Home Extension Agent from 1942 until her retirement in June 1966. During these 24 years, Delaware County's Home Demonstration clubs grew from 35 clubs with 900 members to 86 clubs and 1800 members. Marie was responsible for the girls' 4-H projects until 1955. She previously was a Home Economics teacher in Wayne and Randolph counties and served four years as Home Extension Agent in Wayne County.

### INSTRUCTIONS FOR COMPLETING APPLICATION:

- 1. Applicant must be a senior in high school or older, and a resident of Delaware County.
- 2. Please type or print application.
- **3.** Attach the following to completed application:
  - a. Three (3) character reference letters.
  - b. School transcript
  - c. A one page summary, including educational background, your participation in school and/or community activities, financial needs, work experience if applicable, and any other pertinent information.
- 4. Answer all questions completely. Failure to furnish information requested may disqualify applicant.
- 5. Send or deliver completed application with attachments to:

Purdue Extension - Delaware County

100 W. Main St.

Room 202, County Building

Muncie IN 47305 Phone: 765/747-7732

#### 6. APPLICATION DEADLINE IS: March 15

The scholarship will be awarded at the annual

Achievement Day Luncheon (You will be notified of date and time.)

The winner(s) attendance, as our guest, at this program is encouraged.

Revised January 8, 2018

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# PERSONAL DATA

Applicant Name					
Phone Number					
Present Address					
City	County	State	ZIP		
Marital Status	Number of Dependent	ts	_ Ages		
Date of Birth	Names of Parents				
Funds from other grants or scho	olarships				
The next four (4) lines are to	be completed by a married a	applicant only!			
Current Employer	F	Position			
Salary/Wages					
Spouse's Current Employer	Po	sition			
Salary/Wages					
<b>EDUCATIO</b>	NAL INSTITUTION IN WE	HICH ENROLLMI	ENT IS DESIRED		
School Name	Student ID Number				
Address	Phone		_		
Admitted	Pending				
Course of study	Degree				
Date term begins	Expected date of completion				
Tuition/Fees per semester		Books/su	pplies		
Tuition due date					
Have you received this scholar	shin nreviously?		Voor		

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## REQUIRED REFERENCES

Three (3) letters of character reference are required. This may include former teachers, school officials, employers, or other persons not related to you. List the names of persons whom you have asked to write these letters. Return these letters with your application.

1.	Name	Title	Phone		
	Address	City	State	ZIP	
2.	Name	Title	Phone		
	Address	City	State	ZIP	
3.	Name	Title	F	hone	
	Address	City	State	ZIP	
	scholarship is for \$5 will be paid directly t	uestions truthfully and to the 00 and for a period of study r to the school named after ver e second year, it may or may r	not to exceed 12 r ification of enroll	nonths and that monies	
	If this scholarship is awarded to me and I am not accepted by the school named, or if I do not attend school for the semesters specified, or if I cannot accept the scholarship for any other reason, I will notify the Delaware County Extension Office and the granting of this award will be open for reconsideration by the Scholarship Committee.				
	Signature		Date		