



## Imperial Court of Iowa's Guardian Angel Scholarship

The Imperial Court of Iowa has scholarships available for graduating high school seniors and those post-secondary adult students looking to continue their education. The scholarships will be awarded each year; to those applicants who are enrolled or accepted into an accredited educational program in the State of Iowa. The amount and number of scholarships awarded will be determined based on funds available. The recipients of the scholarships will be chosen by a Scholarship Evaluation Committee chaired by a person who is, at the time of the evaluation process, not an Imperial Court of Iowa member but who is an active member of the LGBT Community. Applications will be accepted January 1<sup>st</sup> through July 31<sup>st</sup> with application review taking place August 1<sup>st</sup> through August 31<sup>st</sup>. Award announcements will take place by September 15<sup>th</sup>. Award recipient will be invited to attend Coronation in September of the year they are awarded the scholarship as a guest of the Imperial Court of Iowa.

### GUIDELINES FOR APPLICATION

In order to qualify for the scholarship, applicants must meet the following criteria:

1. Be a resident of the State of Iowa
2. Enrolled or accepted into an accredited post-secondary school
3. Identify themselves as LGBT or are a supporter of the LGBT Community

### INSTRUCTIONS FOR COMPLETING APPLICATION

1. Application is to be completed by applicant. All questions must be answered. Please type or print clearly.
2. Attach the following to completed application:
  - A. Documentation of enrollment or acceptance into a post-graduate program
  - B. Completed response to required essay question:  
In 1,000 to 1,500 answer the following question,  
*"The word COMMUNITY has many different meanings to everyone. What does Community mean to you?"*  
(Essay evaluation rubric available upon request)
  - C. Two (2) letters of recommendation from ICIA members or active members of the LGBT Community
3. Application and all other required information must be postmarked by **July 31<sup>st</sup>**.

Return completed Application and all required attachments to:  
Imperial Court of Iowa, Inc.  
P.O. Box 1491  
Des Moines, IA 50305-1491



## Application for Imperial Court of Iowa's Guardian Angel Scholarship

### 1. Authorization to Release Confidential Information

If needed I authorize the release of my transcript and financial aid information to the Imperial Court of Iowa, Inc.'s committee assigned the responsibility to distribute funds that I wish to receive. I understand that my eligibility will be partially based upon the submission of this confidential information. Further, I certify that to the best of my knowledge all statements in the application packet submitted by me are correct, complete, and of my own origin.

---

Signature of Scholarship Applicant

---

Date

---

### 2. Personal Information

---

Last Name

---

First Name

---

M.I.

---

Address

---

City

---

State

---

Zip Code

---

( )

Phone Number

---

Email

---

### 3. Enrollment Information

---

Program/School Student is enrolled or has been accepted

---

Major

---

Degree or Certificate Sought

---

Expected Date of Completion



## Imperial Court of Iowa's Guardian Angel Scholarship LETTER OF RECOMMENDATION

### 1. Permission to Release Confidential Recommendation – (Applicant Completes This Section)

I have applied for the *Imperial Court of Iowa's Guardian Angel Scholarship* and understand my eligibility for the scholarship is partially based upon the information provided in this letter of recommendation. My signature below documents my permission for this information to be submitted to the Scholarship Committee.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### 2. Instructions (cannot be member of Scholarship Committee)

**The deadline for submission of the recommendation is July 31<sup>st</sup>.**

You are being asked to provide information that will be used by the Scholarship Committee to determine the extent to which this student exhibits the values of the Imperial Court of Iowa and the LGBT Community. When completed you should mail letter to:

*Imperial Court of Iowa, Inc.*

*P.O. Box 1491*

*Des Moines, IA 50305-1491*

**DO NOT RETURN THE RECOMMENDATION TO THE APPLICANT**

### 3. Imperial Court of Iowa Values - Please rate this applicant based on the following scale:

*E = Exceptional*

*C = Competent*

*I = Opportunity to Improve*

#### **Compassion**

**Rating \_\_\_\_\_**

Applicant displays a positive and considerate attitude toward the LGBT Community and is respectful and is sensitive to the needs of others.

#### **Respect**

**Rating \_\_\_\_\_**

Applicant treats others with dignity and is a wise steward of individual talents and skills.

#### **Communication**

**Rating \_\_\_\_\_**

Applicant strives to communicate with others in an effective and honest manner. Applicant demonstrates willingness to be flexible and open to new thoughts and ideas while celebrating their own diversity.

#### **Excellence**

**Rating \_\_\_\_\_**

Applicant demonstrates a passion for quality, zest for improvement, and commitment to maintaining the highest standard of community service.

**I recommend this student because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 4. Evaluator Information

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email



## Imperial Court of Iowa's Guardian Angel Scholarship LETTER OF RECOMMENDATION

### 1. Permission to Release Confidential Recommendation – (Applicant Completes This Section)

I have applied for the *Imperial Court of Iowa's Guardian Angel Scholarship* and understand my eligibility for the scholarship is partially based upon the information provided in this letter of recommendation. My signature below documents my permission for this information to be submitted to the Scholarship Committee.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### 2. Instructions (cannot be member of Scholarship Committee)

**The deadline for submission of the recommendation is July 31<sup>st</sup>.**

You are being asked to provide information that will be used by the Scholarship Committee to determine the extent to which this student exhibits the values of the Imperial Court of Iowa and the LGBT Community. When completed you should mail letter to:

*Imperial Court of Iowa, Inc.*

*P.O. Box 1491*

*Des Moines, IA 50305-1491*

**DO NOT RETURN THE RECOMMENDATION TO THE APPLICANT**

### 3. Imperial Court of Iowa Values - Please rate this applicant based on the following scale:

*E = Exceptional*

*C = Competent*

*I = Opportunity to Improve*

#### Compassion

Rating \_\_\_\_

Applicant displays a positive and considerate attitude toward the LGBT Community and is respectful and is sensitive to the needs of others.

#### Respect

Rating \_\_\_\_

Applicant treats others with dignity and is a wise steward of individual talents and skills.

#### Communication

Rating \_\_\_\_

Applicant strives to communicate with others in an effective and honest manner. Applicant demonstrates willingness to be flexible and open to new thoughts and ideas while celebrating their own diversity.

#### Excellence

Rating \_\_\_\_

Applicant demonstrates a passion for quality, zest for improvement, and commitment to maintaining the highest standard of community service.

**I recommend this student because:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 4. Evaluator Information

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email