

Deadline: April 1, 2011 F.M. Bistline Memorial Political Science/ Beverly B. Bistline Political Science Scholarship  
Return: **Scholarship Office, Idaho State University, 921 S. 8<sup>th</sup> Avenue, Stop 8391, Pocatello, ID 83209**

**I. PERSONAL INFORMATION** **Scholarship Application Form**

1. Mr./Ms. \_\_\_\_\_  
(Last) (First) (Middle or Maiden)
2. Address: \_\_\_\_\_  
(Number and Street)  
\_\_\_\_\_  
(City) (State) (Zip)
3. Phone number: \_\_\_\_\_ 4. Birthdate: \_\_\_\_\_
5. Bengal ID #: \_\_\_\_\_ 6. Marital Status: ( ) unmarried, ( ) married, ( ) separated
7. Major or program of study: \_\_\_\_\_
8. How many credits have you completed as of the date of this application: \_\_\_\_\_
9. Number of credits enrolled in for the current ISU semester: \_\_\_\_\_
10. Planned Graduation Date: \_\_\_\_\_ Expected degree: \_\_\_\_\_
11. Are you planning to attend Law School? \_\_\_\_\_
12. Are you a U.S. citizen? ( ) yes ( ) no 13. Are you an Idaho resident? ( ) yes ( ) no

**II. STATEMENT BY APPLICANT:** On an additional sheet of paper, write a statement addressing your educational aims, chosen career, plans for accomplishment, past involvement in campus or community politics and any other information you consider to be pertinent. Please be aware that strong emphasis is put on this section of the application by the selection committee.

**III. TRANSCRIPTS:** Include with this application a copy of your most recent ISU transcript including your current semester class schedule (unofficial copy is acceptable).

**III. Letter(s) of Recommendation:** Include one to two letters of recommendation. Letters must address the applicant's academic ability, career objectives, and volunteer experiences.

Office use only			
GPA _____	Class Level _____	#crs fall _____	#crs spring _____
Major _____	Completed # of credits _____		
Membership/Requirements _____			
_____			

**FINANCES:** Please be aware that receiving this scholarship may affect other financial aid awards you receive. Applicants must complete a budget which reflects approximate costs for attending ISU. Attach a written statement if you have unusual financial circumstances which cannot be adequately reflected in this budget.

**PLEASE READ CAREFULLY AND COMPLETE ACCURATELY FOR THE 2011-2012 ACADEMIC YEAR**

**MONTHLY LIVING EXPENSES**

Housing \$ \_\_\_\_\_  
 Gas/Electric \$ \_\_\_\_\_  
 Clothing \$ \_\_\_\_\_  
 Phone \$ \_\_\_\_\_  
 Water \$ \_\_\_\_\_  
 Food \$ \_\_\_\_\_  
 Dental/Med. \$ \_\_\_\_\_  
 Car Payment \$ \_\_\_\_\_  
 Car Ins. \$ \_\_\_\_\_  
 Gas & Oil \$ \_\_\_\_\_  
 Car Repair \$ \_\_\_\_\_  
 Debt Payments \$ \_\_\_\_\_  
 Childcare \$ \_\_\_\_\_  
 Child Support \$ \_\_\_\_\_  
 Other Expenses (Specify):  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL MONTHLY EXPENSES \$ \_\_\_\_\_**

Please list any unusual or out of the ordinary school expenses:

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL EXPENSES \$ \_\_\_\_\_**

**MONTHLY RESOURCES**

Your Salary \$ \_\_\_\_\_  
 Spouse Salary \$ \_\_\_\_\_  
 Aid from Family \$ \_\_\_\_\_  
 VA, DVA Benefits \$ \_\_\_\_\_  
 Unemployment Comp. \$ \_\_\_\_\_  
 Child Support \$ \_\_\_\_\_  
 Food Stamps \$ \_\_\_\_\_  
 TAFI \$ \_\_\_\_\_

**TOTAL MONTHLY RESOURCES \$ \_\_\_\_\_**

**OTHER RESOURCES**

Have you applied for Federal Financial Aid?

Date applied \_\_\_\_\_

Please list any other resources or outside assistance:

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL RESOURCES \$ \_\_\_\_\_**

Please list make, model, and year of vehicles you own/operate:

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

**PLEASE LIST ALL OUTSTANDING DEBTS:**

**LOAN #1      LOAN #2      LOAN #3      LOAN #4**

**Owe To:** \_\_\_\_\_

**Purpose:** \_\_\_\_\_

**Balance:** \_\_\_\_\_

**Monthly Payment:** \_\_\_\_\_

(Attach Additional Sheet If Necessary)

**CERTIFICATION:** I certify that all the information provided on this application is true/correct. I hereby give permission to the ISU Business Office, Financial Aid & Scholarship Office, sponsoring agencies, my employer and my parents to give to the Scholarship Committee information pertinent to verify this completed application scholarship. I also authorize Idaho State University the right to release information, which is pertinent to this application, to others involved in providing funds related to my education. I further authorize Idaho State University to include my name when appropriate in the lists of winners to be publicized in the news media.

Signature \_\_\_\_\_

Date \_\_\_\_\_