

# THE GILES M. GILLEY SCHOLARSHIP

Given by  
IRD ASSOCIATION INC

APPLICATION INFORMATION (PRINT/TYPE CLEARLY)					
NAME:	First	Middle	Last	Date of Birth (MM/DD/YYYY)	
Address:	Number	Street		City	State
Telephone:	Work	Home	Cell (not required)	REQUIRED Email Address	

## IRD ASSOCIATION INC.

Member Name	Place of Employment	Occupation
IRD Membership Status	Active <input type="checkbox"/> Associate <input type="checkbox"/> Operations <input type="checkbox"/> Exempt <input type="checkbox"/>	

**List extracurricular school activities and offices held, community service participation, association affiliations, social groups and hobbies.**

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**Write a short essay on your need for this scholarship. Also mention any other scholarship funding you have already received.**

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High School or College Transcript must be included with this application.

**Deadline: August 31st each year.**

**WITHOUT EMAIL CONFIRMATION NO APPLICATION IS VALID  
PLEASE CONTACT EXECUTIVE SECRETARY BEFORE DEADLINE  
PLEASE REVIEW APPLICATION TERMS & CONDITIONS  
ON [WWW.IRD.NET](http://WWW.IRD.NET) SCHOLARSHIP TAB**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_