



2019 Scholarship Application

Please Read the Following Instructions

The person applying for the scholarship must complete the two-page application form and mail it, along with any attachments, to the address noted below. Please mail your completed form and other required information as early as possible. IOPFDA must receive all documents by March 1, 2019. All documents may also be emailed in **one** PDF to info@iopfda.org.

In addition to completing the two-page application, the following is required:

1. A transcript of grades, credits, and rank in class through and including the first/fall semester of your senior year (high school applicants) or all transcripts covering a minimum of the previous two scholastic years (applicants now in college).
2. A letter of recommendation from a person employed by a NOPA or OFDA member firm. This person may be related to you. See question #2 on the application form.

IMPORTANT: All Materials Must Arrive by March 1, 2019

Please type in or use a black ball point pen. If you need more space to answer a question, use a separate sheet of paper. Be sure your name appears on all attachments, particularly on anything mailed to the association separate from the application.

What are NOPA and OFDA?

National Office Products Alliance (NOPA) and Office Furniture Dealers Alliance (OFDA) are sister associations that comprise IOPFDA and represent over 1,500 office products and furniture dealers and their trading partners. Our members supply the tools and services for the office, the nerve center of the world's industries. From the office comes information that leads to decisions and directives that keep the world's entire economy in motion. Annually, we offer scholarship applications to deserving students of office products and office furniture dealers.

Who Can Apply?

Any person who is an employee or immediate relative to an employee of a current association member firm may apply. Membership status will be verified. Candidates must have graduated from high school or its equivalent before July 1 of the year in which they would use the scholarship. They must have an academic record sufficient to be accepted by an accredited college, junior college or technical institute. Students already in college or graduate school are also eligible to apply.

The Judging

Judging is done by a financial aid professional from a major Washington, D.C. university. This professional takes into consideration academic success, interest, special abilities, financial need and other factors in arriving at an independent decision regarding scholarship recipients. All applicants will be notified in August 2019 whether or not they have been awarded a scholarship.

APPLICATION REQUIREMENTS:

1. **Submit all information by March 1, 2019**
2. **Sign the application in appropriate sections (#15 and bottom of the last page)**
3. **Have your parents/guardians (if applicable) sign the financial section (#15)**
4. **Include all transcripts (#4 or #5)**
5. **Include a letter of recommendation. (#2A)**
6. **Be an employee or immediate relative of an employee of a current association member firm.**

We recommend sending via certified mail or other method that will verify receipt of application. Applicant should retain a copy of the completed application and attachments for their records. Applications and transcripts must be mailed or emailed to IOPFDA. **Faxed copies will not be accepted.**

The Independent Office Products and Furniture Dealers Association 2019 Scholarship Application should be sent to:

IOPFDA Scholarship
3601 East Joppa Road
Baltimore, MD 21234

OR

Email all documents
in one PDF to
info@iopfda.org



2019 Scholarship Application

Applicant Information (Print Legibly):

Mr./ Ms.	Last	First	Middle	Age
Street		City	State	Zip
Telephone		Alternate Phone	Email	

1. Please give the name of the firm and person through which you qualify and state your relationship to employee (i.e., son, daughter, niece, nephew, grandson, granddaughter, stepson, or stepdaughter).

Firm	Employee	Relationship
Firm Address (Street, City, State, Zip)		

2. Give the names of two people as references. Reference "A" must be an association member (may be related to you from the sponsoring firm).

A. Association member reference: (Include a letter of recommendation)

Name	Title	Firm
Contact Number	Email	

B. General reference:

Name	Relationship (i.e. teacher, neighbor)
Title	Contact Number
Email	

HIGH SCHOOL GRADUATE INFORMATION:

To be considered for a 2019 scholarship, you must graduate from high school or its equivalent before July 1, 2019.

DO NOT COMPLETE HIGH SCHOOL INFORMATION SECTION IF YOU ARE CURRENTLY ATTENDING COLLEGE, SKIP TO QUESTION 6.

3. _____

High School you attend(ed)	City	State	Graduation Date
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4. List your SAT and/or ACT Scores, Class Ranking, and G.P.A.:

SAT		ACT		Rank in Class: _____ of _____
Verbal: _____	English: _____	Math: _____	Grade Point Average: _____	
Math: _____	Math: _____	<input type="checkbox"/> High School Transcripts Enclosed <input type="checkbox"/> Transcripts will be sent to arrive by March 1, 2019.		
Writing: _____	ACT Composite: _____			
Combined Total: _____				

5. If you know where you will be attending college, please include the information below:

Name of College	When do you enroll	Major or degree sought
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COLLEGE STUDENT INFORMATION:

6. Last Semester College Transcripts Enclosed Transcripts will be sent to arrive before March 1, 2019.

7. What college are you currently attending? _____

8. What year will you be in for the Fall Semester starting September 2019? Sophomore Junior Senior Post Graduate

9. Major field of study or degree sought: _____

10. Have you made a career choice? Yes No

If yes, list your career choice: _____

Please list the information for sections 11-14 on a separate sheet of paper, typed single-spaced and submit the paper with this application. If you have a resumé that includes the information below, that can be submitted.

11. List any academic honors you have received.
12. If presently working, provide name and address of your employer and your job title.
13. Give a brief description of your work experience, part time or full time.
14. Please provide additional information on your education, experience, achievements or goals that you would like considered.

15. Financial Information

Because the association scholarship is based partially on financial need, it is essential that you provide the following information. This information is kept confidential. *Note: If you are financially independent of your parents, it is not required that they supply financial information.*

	Income (Yearly)	Employer(s)	Title/Job
Applicant			
Father			
Mother			
Other Guardian			
Other Family Income			

We certify these figures to be a complete and accurate report of our total family income.

Applicant (signature)

Father/Guardian (signature)

Mother/Guardian (signature)

16. Applicant's dependents, if applicable, or additional dependents of parents (only if parents filled out question #15).

Name	Age	Relationship to Applicant

Please estimate costs for the coming academic year at your first choice school.

Expense	Estimated Costs
Tuition	
Room	
Board	
Books	
Transportation	
Other (explain)	
Other (explain)	

Please estimate financial resources available to meet the costs listed for your first choice school.

	Estimated Resources
Parents/Guardians	
Your Savings	
Your Earnings	
Social security or Veterans Benefits	
Institutional Financial Aid (scholarships, grants, loans, etc.)	
Federal or State Aid	

17. On a separate sheet of paper, list any other information related to finances that you want considered.

To the best of my knowledge, the information contained in this application is correct.

Applicant Signature

Date

Take a moment to check the list below before sending application to IOPFDA. If any part of the application is not completed by March 1, 2019, the applicant will be disqualified.

- Parent(s) signature and my signature at financial information box.
- Signed and dated application on last page.
- Included recommendation letter.
- Included transcripts from school.
 - Requested transcripts from school to be mailed to IOPFDA.