



BOMA Iowa Scholarship Application

Applicant Information

Name: _____ Date: _____
Last First M.I.

Mailing Address: _____ Phone: _____
Street address Apt/Unit #

_____ Email: _____
City State Zip Code

Certification being pursued: _____

BOMI International ID Number (if applicable) _____

Have you received this scholarship in the past? Yes No If yes, when? _____

Other Education Achieved

High school: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Current Employment

Company:	_____	Phone:	_____		
Address:	_____	Supervisor:	_____		
Job title:	_____	From:	_____	To:	_____
Responsibilities:	_____				

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge. I certify that I have both read and understand the BOMA Iowa Scholarship Policies document on the BOMA Iowa website which accompanies this application.

If this application leads to my receipt of a scholarship, I understand that false or misleading information in my application may result in the withdrawal of the scholarship.

Signature:	_____	Date:	_____
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