



## Scholarship Fund

Members and friends of IYANW have contributed funds for a scholarship. This fund awards one or more gifts to applicants for reimbursement of IYNAUS Certification expenses, workshop expenses, or convention expenses.

Scholarships will be awarded twice yearly. You will be notified no more than 15 days following the deadline if you have been chosen. **DEADLINES FOR APPLYING: JANUARY 31 AND JUNE 30.**

## Requirements

- ❖ IYANW Member in good standing
- ❖ Provide confirmation to attend certification assessment, workshop, or convention within the next 45 days following the application deadline (60 days prior to the event).
- ❖ Form from the student's recommending teacher (usually their primary teacher) submitted with application

## Guidelines for Selection

- ❖ Financial Need
- ❖ Dedication to the practice of Iyengar Yoga
- ❖ Scholarship Committee members are not eligible for scholarships
- ❖ Availability of funds. Awards will be granted up to \$200.
- ❖ Recipients may not reapply for a minimum of two years following their award.

## Process of Selection

- ❖ The committee will meet monthly or as needed
- ❖ Selection will be by a blind process (the committee members will not be told the names / locations of applicants)
- ❖ If multiple candidates are found to be eligible, the recipient(s) will be chosen by lottery

# Application Form

Instructions: Answer all questions. Print clearly in ink. If necessary, use a separate piece of paper. Make a copy for your records. **Forms must be received by the deadline to be considered (January 31 or June 30).** Mail to:

Judy Landecker, IYANW Scholarship Chair, 2751 Grizzly Gulch Dr, Helena, MT 59601-9667

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone Number: (\_\_\_\_) - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Study History:

When did you begin your study of Iyengar Yoga? \_\_\_\_\_

Name of Current Iyengar Yoga Teacher: \_\_\_\_\_

List other Iyengar Yoga teachers with whom you have studied: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List Iyengar Yoga classes / workshops you have attended in the past 12 months  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your current practice  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your participation as an active member of your Iyengar Yoga community  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Event (including dates and location) scholarship will be applied towards:  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Expenses (Event, travel, food, and lodging)

Amount you can contribute \_\_\_\_\_

Amount you are requesting from the scholarship fund \_\_\_\_\_ (current maximum available is \$ \_\_\_\_\_)

Have you received a scholarship before? (Yes / No) \_\_\_\_\_

If so, list the date (s) and amount (s)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your financial need: Include your household's monthly income # of dependents in your household  
\$

And any other pertinent financial information

Describe the importance this scholarship has for you:

In the event that I have to cancel my participation in the funded event due to illness or emergency or death within my family, I will refund the full amount of the scholarship award to IYANW for use in future scholarship awards.

I attest that the information provided is an accurate and factual representation of my circumstances.

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**Applicant Signature**

**Date**

