IOWA SOCIETY OF RADIOLOGIC TECHNOLOGISTS SCHOLARSHIP – 2022

Technologist Scholarship and Mary Ann Jennings Memorial Student Scholarship

The ISRT in keeping with its mission to educate has provided two scholarships available for each a Technologist and a Student Radiographer. Two $500 scholarships will be awarded each year; one to a second year student and the other to a technologist enrolled or accepted into an educational program. The recipients of the scholarships will be chosen by lottery at the ISRT annual meeting in April. Recipients need not be present to win. The deadline for application is February 1st of each year.

*GUIDELINES FOR APPLICATION*

In order to qualify for the scholarship, applicants must meet the following criteria:

1. A Radiologic Technologist must:
   1. Be a current member of the Iowa Society of Radiologic Technologists
   2. Hold a current Iowa Permit to Practice,
   3. Hold active status in the ARRT or be registry eligible
   4. Be enrolled in or accepted into a post-graduate program

1. A Radiologic Technology Student must:
   1. Be a current member of the Iowa Society of Radiologic Technologists
   2. Be enrolled in an accredited Iowa Radiologic Technology program for at least nine months by Feb. 1st

\*(9 months = enrolled by May 1)

* 1. Have a current cumulative GPA of 3.0 or higher

*INSTRUCTIONS FOR COMPLETING APPLICATION*

1. Application is to be completed by applicant. All questions must be answered. Please type or print clearly.
2. Attach the following to completed application:

A. Technologists:

* 1. Copy of ISRT membership card
  2. Copy of Iowa Permit to Practice license
  3. Copy of ARRT card or letter from program director stating Registry eligibility
  4. Documentation of enrollment or acceptance into a post-graduate program

B. Students:

* 1. Copy of ISRT membership card
  2. Letter from an instructor, documenting enrollment in RT program
  3. Non-official transcript of courses with GPA indicated on transcript

1. Application and all other required information must be postmarked by February 1st.
2. Awards presented at the Friday Session of the ISRT Annual Meeting.

Mail your completed application with attachments to ISRT Educator Chair:

Don Bishop

Allen College – UnityPoint Health

1825 Logan Avenue

Waterloo, IA 50703

[Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu)

APPLICATION FOR SCHOLARSHIP - IOWA SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ISRT)

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

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

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Phone : (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_\_\_\_\_

Home Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATION**

I am applying for the: \_\_\_\_\_\_\_ Mary Ann Jennings Memorial Student Scholarship

\_\_\_\_\_\_\_\_\_ Technologist Scholarship

School or college to which the applicant is enrolled or has been accepted:

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

City, State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree or Certificate Sought: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Date of Completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Career Objective: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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The facts set forth in my application are true and complete.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_