



**South Western Illinois
Speech, Language & Hearing Association**

SWISHA, P.O. Box 37, Glen Carbon, IL 62034

Attn: Scholarship Committee

president@swisha.org

Madie Landers Scholarship Application

Date: _____

Name: _____

Current Address: _____

Permanent Address: _____

Telephone: _____ (Local)

_____ (Permanent)

Graduation

University: _____

Degree: _____ M.S. _____ M.A. Other: _____

Major: _____ Speech/Language Pathology _____ Audiology

Semester: _____ Year: _____

Grade Point Average

Undergraduate: _____ Graduate: _____

Department Chair _____

Department _____

Address _____

PLEASE ALSO INCLUDE ONE LETTER OF RECOMMENDATION FROM A DEPARTMENT
PROFESSOR OR SUPERVISOR.

Applicant should complete the following questions:

1. Describe the qualities that you feel make you an appropriate candidate for SWISHA's Madie Landers Scholarship?
2. Identify the types of experiences you have had with communication/hearing disordered individuals.
3. Indicate experiences you have had or volunteer work you have done which relates to the professions of speech/language pathology and audiology.
4. List your university activities, honors, and professional affiliations.

Signature of Applicant

Applicants must be full-time students at an Illinois University or a University in the St Louis area and have a permanent residency within the Illinois counties of St. Clair, Madison, Monroe, Randolph, Washington, Clinton, Jersey, Bond, Macoupin and Montgomery. Other criteria to be considered in presenting the award are:

- additional length of time to be a student (must be a student at least through the Fall semester following presentation of the award);
- GPA (must have a GPA of at least 3.0 on a 4.0 scale);
- career objectives (should be able to state specific career goals);
- professional involvement (should be involved in community or university-related speech and hearing activities);
- other honors, graduate assistantships, etc.; and
- letter of recommendation from university faculty.

The SWISHA scholarship committee shall review applications and make a recommendation to the Executive Board for the final selection. The stipend is \$1,000 and will be awarded in May of each year for the following school year.

APPLICATIONS ARE TO BE POSTMARKED NO LATER THAN MARCH 20. RETURN THIS FORM, THE APPLICATION, AND YOUR LETTER OF RECOMMENDATION TO:

SWISHA
P.O. Box 37
Belleville, IL 62034
Attn: Scholarship Committee