ILLINOIS PUBLIC SERVICE INSTITUTE

October 5 - 10, 2025

KELLY KERR MEMORIAL - IPWMAN SCHOLARSHIP APPLICATION

Application submittal is open to any IPWMAN member agency employee registered for IPSI.

Name: _____

Address: _____

City: _____ **State:**_____ **Zip:**_____

Phone: _____ **Fax:** _____ **Email:**_____

IPSI Year: 1) ____ **2)** ____ **3)** ____ **Year 1 registrations are very limited.**
Please contact Mary Bender at mbender102@aol.com to assure availability before applying for a scholarship.

PRIOR IPSI SCHOLARSHIP RECIPIENT Yes ___ **No** ____ **If yes, which year?** _____

Employer: _____

Employer Address:_____

Director (or equivalent) Name:_____ **Title:** _____

Email Address: _____ **Phone Number:** _____

Present Position/Title: _____

Attach a brief written narrative on how you feel this course will benefit you and your career. (Max. 500 words)

Attach a letter from your employer with an endorsement of your attendance and a statement about the ability and willingness for your employer to cover for the three year program if you do not receive the scholarship?

_____

Have you applied for scholarship funding from any other IPSI sponsor?

Yes ____ **No** ____ **If yes, which sponsor?** _____

How did you hear about IPSI?

_____

In which IPWMAN Region are you a member?

Region:____

Do not pay the registration fee until after you are notified about the scholarship.

Total scholarship amount is $595. You will be responsible for the remaining fee balance and all other expenses. **Only 1 IPWMAN scholarship will be awarded per IPSI session.**
Please submit your application along with the registration form by email to:

Mark Runyon
mrunyon@ipwman.org
630-636-8689

DEADLINE FOR FALL 2025 APPLICATION
August 1, 2025