

**STUART LIBRARY FOUNDATION'S INTERNATIONAL TRAVEL  
SCHOLARSHIP APPLICATION:  
PHASE II**

**Phase II Applications Due August 14, 2020**

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

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country/countries you are applying to travel to: \_\_\_\_\_

Are you planning on traveling independently or with a group? \_\_\_\_\_

Educational reason for the destination chosen:

\_\_\_\_ Agriculture      \_\_\_\_ Fine Arts      \_\_\_\_ Culinary      \_\_\_\_ Medical  
\_\_\_\_ Humanitarian      \_\_\_\_ History      \_\_\_\_ Science      \_\_\_\_ Technology  
\_\_\_\_ Other – please explain: \_\_\_\_\_

Please explain how the destination and overall trip would benefit you:

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

What do you hope to gain from this experience?

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

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Please research the following and give approximate budget information for all:

Flights:

Hotels:

Food:

Tours:

Travel

Insurance: Pre-trip

Vaccinations

(if needed)\*:

Incidental

Expenses:

Total estimated cost of trip: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\*Immunizations may be required for some destinations. You can find this information at:  
<https://idph.iowa.gov/immtb/immunization/travel>.

If you are selected to continue past Phase II, you will be asked to meet with the Stuart Library Foundation Board for an interview. Upon completion of the candidate interviews, recipient(s) of the scholarship(s) will be announced and notified.