

STUART LIBRARY FOUNDATION'S INTERNATIONAL TRAVEL SCHOLARSHIP

Administered by the Stuart Public Library Foundation: People Advocating for Library Success

Program Goal: Create a scholarship program that will enable young adults to travel outside the United States as part of an effort to build knowledge about varied global cultures, history, economics, environments, and societies.

NAME AS IT WOULD APPEAR ON YOUR PASSPORT (last, first, middle):

DO YOU CURRENTLY HAVE A PASSPORT? _____ *If yes, when does it expire?* _____ *If no, have you applied for one?* _____ *If yes, when?* _____

HAVE YOU EVER TRAVELED OUTSIDE OF THE U.S.? _____ *If yes, where?* _____

Was your international journey part of a school trip? _____

DATE OF BIRTH: _____ **EMAIL:** _____

HOME PHONE: _____ **CELL PHONE:** _____

CURRENT ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PERMANENT ADDRESS (if different from current):

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

HIGH SCHOOL (name and location):

GRADUATION YEAR: _____

POST-SECONDARY EDUCATION (name of school and location):

GRADUATION YEAR/EXPECTED GRADUATION YEAR: _____ **MAJOR:** _____

WHAT COUNTRY/COUNTRIES DO YOU PLAN ON TRAVELING TO USING THIS SCHOLARSHIP?

HOW LONG IS YOUR PLANNED TRIP? _____

PLEASE EXPLAIN WHY YOU HAVE CHOSEN THIS TRAVEL DESTINATION/ITINERARY:

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(continued) **PLEASE EXPLAIN WHY YOU HAVE CHOSEN THIS TRAVEL DESTINATION/ITINERARY:**

PLEASE EXPLAIN WHAT IMPACT YOU FEEL THIS SCHOLARSHIP WILL HAVE ON YOUR FUTURE. THIS CAN APPLY TO EDUCATION, EMPLOYMENT, LIFE GOALS, AND OTHER OPPORTUNITIES.

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WHAT LANGUAGES, OTHER THAN ENGLISH, HAVE YOU STUDIED? Please specify your level of fluency (beginner, intermediate, proficient, can only speak, can only read, etc).

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PLEASE PROVIDE THE INFORMATION FOR TWO REFERENCES. THEY MUST BE INDIVIDUALS THAT ARE NOT RELATED TO YOU:

1. NAME: _____

ADDRESS: _____

PHONE: _____ CELL PHONE: _____

EMAIL: _____

2. NAME: _____

ADDRESS: _____

PHONE: _____ CELL PHONE: _____

EMAIL: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO *If yes, please explain the nature of the crime:* _____

DO YOU HAVE ANY CRIMINAL CHARGES PENDING AGAINST YOU? YES NO *If yes, please explain the nature of the charges:*

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NOTE: if you are selected as a Finalist, you will be contacted by **April 14, 2025** to schedule an interview with representatives of the Stuart Library Foundation. At least one week prior to the interview, you must email **libraryfoundation10@gmail.com** and provide a specific dollar amount being requested from this scholarship. In your request, you must also supply a projected detailed itinerary and budget expectations which includes expenses of all methods of travel (air, rail, bus) and housing. The projected itinerary, travel, and housing expenses will help provide verification to the need of the funds. If you will be receiving funding from elsewhere, you must also provide that information.

APPLICANT'S CERTIFICATION (please check each box if true):

- ☐ I understand that all statements made in this application are true and complete to the best of my knowledge. I understand that any deliberately falsified statements, misrepresentations, or omissions made by me as part of my application shall be grounds for ineligibility for the scholarship, including should one be discovered after I am chosen as a finalist.
- ☐ I acknowledge that I have read this application for the Stuart Library Foundation's International Travel Scholarship, fully understand its contents, and voluntarily provide the information.

APPLICANT SIGNATURE: _____ **DATE:** _____

PROGRAM DISCLAIMER: The Stuart Library Foundation Board will review all applications submitted by the deadline. Those accepted to continue into Phase II of the application process will be contacted by April 14, 2025. Those selected for Phase II must have the Phase II application completed and submitted by April 28, 2025. Please see the website (stuartlibraryfoundation.com) for more details.

The Stuart Library Foundation is under no obligation to fund this scholarship.