

**IAHCE STATE BOARD APPLICATION BLANK**

District # \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ County \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone\_(\_\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

HCE Member \_\_\_\_\_ Years - Active Years? \_\_\_\_\_

Applying for Office of \_\_\_\_\_ Second Choice \_\_\_\_\_

**OFFICES HELD:**

Unit: \_\_\_\_\_

County: \_\_\_\_\_

State: \_\_\_\_\_

Submit a brief paragraph stating your ability to carry out responsibilities in the office or “area of work” for which you are applying. (Please attach) Application form may be retyped.

Special Skills or Talents: \_\_\_\_\_

\_\_\_\_\_

Personal History: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Circle the following questions YES or NO.)

- 1. Will your personal health allow you to maintain a high level of activity during extended meetings and travel? Yes or No
- 2. Are you free to attend meetings lasting several days? Yes or No
- 3. Are you willing to drive a car for long distances? Yes or No
- 4. Do you have a computer with e-mail and internet access? Yes or No
- 5. Do you have the ability to compose letters/speeches? Yes or No

Community Activities: \_\_\_\_\_

\_\_\_\_\_

Non-HCE Offices held: \_\_\_\_\_

\_\_\_\_\_

(Attach additional sheets or retype and add needed space.)

**SEND APPLICATION TO IAHCE NOMINATING COMMITTEE CHAIRMAN.** (Contact the IAHCE Secretary for this information. Name and address on page 1 of this Guidebook.)

**POSTMARKED BY OCTOBER 1<sup>st</sup>.**

**IAHCE STATE BOARD APPLICATION BLANK**

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**PERSONAL REFERENCE FOR APPLICANT TO IAHCE BOARD**

This form should be filled out by any member of the applicant’s County HCE Board. (This confidential information may be mailed separately to the Nominating Committee Chairman.)

Name of Candidate \_\_\_\_\_ County \_\_\_\_\_

Poise and Speaking Ability \_\_\_\_\_

\_\_\_\_\_

Character \_\_\_\_\_

Leadership Skills \_\_\_\_\_

Ability to Work with Others \_\_\_\_\_

What other qualities does she (he) have which you feel would qualify her/him for an IAHCE Board office?

\_\_\_\_\_

\_\_\_\_\_

For what office do you recommend her/him? \_\_\_\_\_

Other Comments \_\_\_\_\_

Signed \_\_\_\_\_ Title \_\_\_\_\_

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**TO BE COMPLETED BY THE IAHCE NOMINATING COMMITTEE**

Individual seems most qualified for the office of \_\_\_\_\_

Additional Comments \_\_\_\_\_

Send reference to Nominating Committee Chairman. (Contact IAHCE Secretary whose name and address are on page 1 of this Guidebook if you need to know the current Chairman.)

**POSTMARK BY OCTOBER 1ST**

## **APPLICANT GUIDELINES**

1. All areas of the application must be completed to be considered and must be sent to the Nominating Committee Chair by the postmarked deadline.
2. All interviews must be in person with the Nominating Committee.
3. NO campaigning, i.e., no printed material.
4. Wear business attire during interview and presentation at the Annual Business Meeting.
5. All candidates are to sit in a designated area at the Annual Business Meeting.
6. Candidate may make up to two (2) minutes presentation at the Annual Business Meeting.

## **DISTRICT DIRECTOR APPLICANT GUIDELINES**

1. **District Director Applications are due to the District Committee by May 1 prior to election in August** of same year. Once reviewed by the District Committee, qualified applications should be forwarded to the current District Director by June 1 to be reviewed by the IAHCE Nomination Committee at June Board meeting.
2. All interviews must be in person with the District Nominating Committee by July 5.
3. Candidates should wear business attire during the interview and the 2 minute District Workshop presentation.
4. District Directors are elected at the August District meetings during the current Director's last year of last term.
5. Elected District Directors are installed and take office immediately at the March Conference of the next year.

## **SCHOLARSHIPS**

The scholarships offered by the Illinois Association for Home and Community Education are:

- A. IAHCE Member Education Scholarships: These Scholarships are awarded by the IAHCE Scholarship Committee according to the guidelines found in the IAHCE Guidebook.

All scholarships are offered with no discriminations to sex, age, years in school, national origin.

- B. Ruth B. Sayre Scholarship which is offered by our affiliate CWC. Information can be found in the IAHCE Guidebook guidelines page 65 and at [www.cwcusa.org](http://www.cwcusa.org)

Scholarships are renewable to qualified applicants.

## **SCHOLARSHIP COMMITTEE GUIDELINES**

This Committee shall consist of four members who are presently on the IAHCE Board. They will serve revolving two-year terms so that two new members will be appointed each year. The IAHCE Secretary should not be a member of this committee, because she/he would know the identity of the applicants.

### **DUTIES OF THE SCHOLARSHIP COMMITTEE:**

- Review scholarship guidelines yearly.

- Choose full time recipients.

- Directs the IAHCE Treasurer to issue checks for scholarship recipients.

Full scholarships of \$500 each up to ten (10) scholarships awarded yearly if funds are available.

## **IAHCE EDUCATIONAL SCHOLARSHIP GUIDELINES**

1. The applicant must be a member in good standing or an immediate family member, child or grandchild, niece or nephew of such member of a county HCE/HEA for a minimum of three years. Recipient of an IAHCE Scholarship must be a current resident of Illinois regardless of whether they attend a school in Illinois.
2. The applicant must attend a vocational institution or institution of higher learning working toward a vocational certification, undergraduate degree or graduate degree.
3. The Applicant must submit a new application each year. Past recipients may not apply again.
4. For each of the full (\$500) scholarships, the student must be considered a full-time student by the college the student is/will be attending. Auditing of classes cannot be included in minimum hours.
5. The Scholarship Committee reserves the right to make judgment in cases not covered by the guidelines.
6. Students must maintain a 2.0 point © average. Transcript required for most current school year.
7. Payment of all scholarships is made in two installments. The first half of payment will be made by July 15. The second half will be made no earlier than January 1 – upon receipt of the student’s fall grades transcript by the scholarship committee chairman. Her/his name and address will be on the letter of acceptance that carries the July check.
8. Scholarship applications must be postmarked by May 1.
9. All applications will receive a letter by July 1 indicating whether or not they are recipients of the scholarship.
10. A photo must be attached to the cover page of the application. These photos will be used by IAHCE for publicity purpose (Newsletter/Annual Conference). If an applicant is not accepted for a scholarship, the photo will be returned upon request.
11. If for any reason, the applicant is unable to enroll, the awarded scholarship is to be returned in full to the IAHCE Treasurer.
12. No current IAHCE Board Member will be eligible for a scholarship.
13. The IAHCE Board Secretary will receive the application – keeping the cover page until the scholarship winners have been chosen, so that the committee will not know the identity of the applicants until after selections are made.



**APPLICATION FOR IAHCCE EDUCATIONAL SCHOLARSHIP**

(Additional sheets may be used)

*Past recipients may not apply again.*

List names of High School (s) or college (s) attended and number of years each: \_\_\_\_\_

\_\_\_\_\_

Name & Address of college you plan to attend: \_\_\_\_\_

\_\_\_\_\_

Name of course of study or major you plan to take: \_\_\_\_\_

What license, certificate or degree is granted on completion?: \_\_\_\_\_

What are your employment goals/plans?: \_\_\_\_\_

Will you be considered a full-time student by the college you attend? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you applied for this scholarship before? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you received this scholarship before? Yes \_\_\_\_\_ No \_\_\_\_\_

Please attach the most current grade transcript.

List other Honors and awards received: \_\_\_\_\_

\_\_\_\_\_

List School Activities: \_\_\_\_\_

List Community/Church Activities: \_\_\_\_\_

\_\_\_\_\_

List Your Work Experiences: \_\_\_\_\_

Attach two non-family letters of recommendation. (Written within the last six (6) months.)

Attach a short essay (approximately 250 words) stating your educational goals and career.

## RUTH B. SAYRE SCHOLARSHIP

Sponsored by  
Country Women's Council USA  
The Associated Country Women of the World

Mrs. Ruth Buxton Sayre attained national and international recognition championing a better way of life for rural people. Her efforts on behalf of rural women and families spanned three decades and earned her high posts in state, national and international organizations. She served as ACWW President 1947-1953.

One of her many distinctions included being the only woman appointed to a USA Advisory Committee by President Eisenhower. In 1976 she was honored by being inducted into the Iowa Woman's Hall of Fame.

"If goods don't cross the borders, soldiers will," expresses her views on trade and peace. She constantly encouraged women to "let out the seams" of their thinking.

The aim of this memorial scholarship is to lift people, in her name, by helping them to help themselves through education

### RUTH B. SAYRE SCHOLARSHIP GUIDELINES (Revised March 2015)

#### I. Eligibility:

1. Be a legal resident of USA
2. Live in a state of a CWC member society.
3. Demonstrate leadership ability need.
4. Have a financial need.
5. Carry a minimum of nine (9) credit hours.

#### II. General Conditions:

- a. Country Women's Council (CWC) administer the fund.
- b. Scholarship (s) shall be paid up to the amount of \$500.00 for a 12-month period of study.
- c. Funds may be used to supplement tuition, books, or other required educational needs.
- d. Scholarship recipients may apply for the same award the succeeding year if satisfactory progress is made.

#### III. Applications

1. Applicant need not be a member of ACWW – CWC.
2. Application forms – available on CWC web site – must be sent through applicant's state society chair or president of a ACWW – CWC affiliated society list on website: [www.cwcusa.org](http://www.cwcusa.org).  
Due date is March 1.
3. Application shall contain;
  - a. two (2) reference letters (only) **must be from Non-family members**.
  - b. transcript of grades.
  - c. a summary of applicant's experiences goals and financial need.
4. Applications from society president or chair shall be postmarked to: CWC Vice-Chairperson by April 1. Name and address found on website [www.cwcusa.org](http://www.cwcusa.org).

#### IV. Administration:

The Scholarship Selection Committee shall consist of:

- a. The Vice Chairperson of CWC who serves as chair.
- b. Three qualified judges appointed by the chairperson.
- c. Winners will be posted on website [www.cwcusa.org](http://www.cwcusa.org) after June 1.

## 2025 IAHCCE SUPPORT FUND ADVISORY COMMITTEE

### Officers

Kathy Peterson, Librarian  
320 Calhoun St.  
Morris, IL 60450  
779-375-7460  
Dist. #1 Grundy County  
kathyiahceproud@yahoo.com

Melissa Chitwood, Chairperson  
1408 E. 2250 North Rd.  
White Heath, IL. 61884  
217-493-4441  
Dist. #2 Champaign County  
mchitwoo@illinois.edu

Carla Meyer, Secretary  
6526 S Cranes Grove Rd.  
Baileyville, IL 61007  
815-291-5963  
Dist. #1 Stephenson County  
carla.meyer8@gmail.com

### Advisory Committee

Linda Tarpley  
(2023-25 2nd Term)  
924 Crestview Trail  
Byron IL 61010  
815-980-1446  
Dist. #1 Winnebago County  
tarpleylinda@aol.com

Carol Ropp  
(2025-2027 1<sup>st</sup> Term)  
3620 S. Taylor Rd.  
Decatur, IL 62521  
217-855-3339  
Dist. #2 Macon County  
one4thethrees@comcast.net

Patricia Mills  
(2023-25, 2nd Term)  
813 Stewart St  
Carmi IL 62821  
618-384-6942  
Dist. #4 White County  
jmills5@earthlink.net

District 1 Vacancy  
(2025-2027 1<sup>st</sup> Term)

Connie Grapperhaus  
(2024-26, 1st Term)  
11057 State Rt 143  
Marine IL 62061  
618-887-4827  
Dist. #3 Madison County  
grapp4@att.net

Judy Parr  
(2025-2027 1<sup>st</sup> Term)  
5847 Rosebud Rd.  
Metropolis, IL 62960  
618-524-5702  
Dist. #4 Massac County  
jparr5847@gmail.com

Darlene Curry  
(2022-24, 2nd Term)  
207 Worner St  
Green Valley, IL 61534  
309-369-4250  
Dist. #2 Tazewell County  
darlene.curry@yahoo.com

Martha Allison  
(2023-25, 2<sup>nd</sup> Term)  
9352 N 1250<sup>th</sup> St  
Newton, IL 62448  
618-267-3379  
Dist. #3 Jasper County  
Martha.allison47@gmail.com

## **ILLINOIS ASSOCIATION FOR HOME AND COMMUNITY EDUCATION SUPPORT FUND**

### **WHAT IS IT?**

This fund is a special account to provide innovative “extras” for the Association for Home and Community Education programs. By pooling small contributions from many interested individuals and organizations, we are accumulating enough money to assure a continuing source of funds. Together we can build a more secure financial future for our already well-established, high quality programs. The fund will be used primarily for the support of HCE programs provided by University of Illinois Extension Educators, County HCE’s and/or collaborative efforts of the two.

**IAHCE MEMORIAL FUND DONATION IS ALSO A PART OF THIS FUND.**

### **HOW TO MAKE CONTRIBUTIONS TO THE SUPPORT FUND:**

Make checks payable to: Illinois Association for Home and Community Education (IAHCE) Support Fund.

Mail to: **IAHCE Treasurer** whose name and address is on Page 1 of this Guidebook.  
**PLEASE DO NOT SEND DONATIONS TO THE UNIVERSITY OF ILLINOIS.**

Educational materials are available through the Support Fund Librarian/Secretary whose name and address is listed on the previous page of this Guidebook.

## **IAHCE SUPPORT FUND TRUST GUIDELINES**

**Prepared by the IAHCE Support Fund Advisory Committee**

The trust is named the Illinois Association for Home and Community Education Support Fund Trust. The Trust Agreement reads in part:

Today's homemakers are better educated and more culturally diverse than at any time since IAHCE was organized. IAHCE is challenged to meet the growing needs of young adults, the aging, and other various groups. Homemakers want to know how to organize for effective group action to improve the standard of living for their families, and for individuals both nationally and worldwide. Only increased funding can provide the resources necessary to continue to provide quality programming characteristic of IAHCE.

Enrichment and/or additional support provided by the Support Fund Trust for home economics Extension programs should first make a contribution to the HCE programs, after which the support may be extended to other audiences. The monetary support provided will vary from year to year depending on amount of donations and interest generated by the Trust. Some possible uses of the Trust are, but are not limited to:

1. Printed materials for state-wide use.
2. Packaged lessons as alternatives to the regularly scheduled Lessons for Living.
3. Support materials for Lessons for Living delivered via Webinar
4. Media development [videotapes, slide programs, computer programs, displays] in support of programs for IAHCE.
5. Additional resources for program areas presently experiencing inadequate support such as household equipment and cultural arts.
6. Series of regional meetings on topics of particular interest, and
7. Implementation of proposals developed by counties in support of particular IAHCE programs.
8. Building/facility rental fees up to \$50 per county for HCE programs.

The IAHCE Support Fund Advisory Committee offers the following guidelines and ideas:

Intended Use/Expenditures of grant:

### Programming

1. HCE generated educational programs, which can be shared with other counties, should include written material of program.
2. Advertising – reasonable fee
3. Speaker fee
4. Programs will not be funded more than two [2] years.

## IAHCE SUPPORT FUND TRUST GUIDELINES

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### New Membership Recruitment

1. New ways for HCE to increase membership.
2. Programs that will interest the general public and get new members for HCE. (In order to be funded for a second year you must show an increase in your county membership.)

### Publicity

1. A program/project that gets the word out about HCE, i.e. mugs, bookmarks, etc. (If the project is funded, full information must be written up and sent to the Support Fund Secretary in order that other counties may duplicate your project.)
2. New ways to advertise HCE.
3. Use of the computer to advertise your county, i.e. web site.

The Support Fund Advisory Committee will not fund:

- ▶ Door prizes
- ▶ Refreshments
- ▶ Mileage
- ▶ Lodging
- ▶ Coordinator fees
- ▶ Program entertainment [other than speaker fee]

Duplication of previous programs already funded to another county by a grant will not be funded.

We recommend that your county network with other groups and explore local resources for cooperative funding of programs along with your Support Fund Grant.

Specific information should be given to describe the proposed program, with its benefits and uses in the community, not a general idea of the program. Intention to share the program's expense should be indicated in the financial portion of the application. Application should consist of only one program/project. If you plan to present another program/project, please complete a separate application.

This is only intended for general information. Trust funds are not available to award all grant requests. Financial circumstances in some counties and/or low membership will be taken into consideration when awarding a grant. The committee will also take into consideration the program and its value to other counties for programming and/or ways to increase our membership throughout the state.

**ILLINOIS ASSOCIATION FOR HOME AND COMMUNITY EDUCATION**  
**SUPPORT FUND APPLICATION**

(Application Due June 1. Send to Support Fund Chairman)

1. Proposed Program Title:

2. Description of Proposal:

3. Purpose of the Program Materials:

4. Suggestions for Use (answer all that apply)

General distribution through County HCE and County Unit Offices:

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Lessons For Living (University of Illinois Extension)/Lessons for Learning (HCE/HEA):

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Other: \_\_\_\_\_

**SUPPORT FUND APPLICATION**

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5. Budget Projections:

6. Expected Completion Date:

The project should be completed by June 1 of the year following receipt of the award. Awardees will be notified by September 1<sup>st</sup>. Projects will be allowed to be submitted for a grant after completion. Requests must be submitted within one (1) year of completion.

7. You will collect your original receipts from expenses and send them, along with a final report documenting how the monies were spent to the IAHCE Support Fund Chairman. After reviewing the report, a letter and the receipts will be sent to the IAHCE Treasurer. A check will be sent to you for your expenses.

8. AWARDEES WILL display their project at the IAHCE Annual Conference with the source of funding noted on the display. They will write a separate article detailing the project for the Support Fund section in the May IAHCE NEWSLETTER. Please plan to provide copy of the finished project (whether it be a video, a pamphlet, etc.) to the Support Fund Advisory Committee Librarian (IAHCE First Vice President) for availability to other counties.

Send postage paid and postmarked June 1st.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

COUNTY \_\_\_\_\_ POPULATION \_\_\_\_\_

NUMBER OF HCE/HEA MEMBERS \_\_\_\_\_

TELEPHONE NUMBER (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS (IF APPLICABLE) \_\_\_\_\_

**ILLINOIS ASSOCIATION FOR HOME AND COMMUNITY EDUCATION**  
**IAHCE MEMORIAL FUND**

1. Established as a restricted account in June 1990, by the IHEF Board following the death of past IHEF Board Member Marilyn Hartweg. Family and friends made a contribution to establish this fund.
2. Upon sufficient accumulation of funds, a Certificate of Deposit was purchased.
3. Interest from the Fund will be used for programming.
4. Contributions in memory/celebration of any IAHCE Member, by individual or county are welcome.
5. Donations by individuals to commemorate other special events/dates are also encouraged.
6. Following the death of a current IAHCE Board Member, a donation will be given by the IAHCE Board to this fund.
7. Memorial Funds are also put under the supervision of the Support Fund Committee

**IAHCE SALES ORDER FORM**

**CVH/SALES CHAIRMAN:**

*Carol Meffert  
13258 Pocahontas Rd.  
Highland, IL 62249 (618) 567-5154*



**ORDERED BY:**

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

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

City & Zip: \_\_\_\_\_

*Postage and handling will be figured and added to the subtotal by the Sales Chairman.  
MAKE CHECKS PAYABLE TO: IAHCE*

<i>DATE</i>	<i>COUNTY</i>	<i>PHONE</i>	<i>EMAIL</i>	<i>DATE NEED</i>	<i>TERMS</i>
					<b>Due on receipt</b>

<i>QUANTITY</i>	<i>DESCRIPTION</i>	<i>PRICE EACH</i>	<i>TOTAL</i>
SUBTOTAL			
SHIPPING & HANDLING			
TOTAL DUE			

**ORDER ONLINE: [www.iahce.org](http://www.iahce.org)**  
If you have not received order within 2 weeks, contact the Sales Chairman

**THANK YOU FOR YOUR BUSINESS!**