

The Scholars Award

Sponsored by IP Corporation

In affiliation with the ACMA and ICPA

Summary

IP Corporation will sponsor six \$3,500 scholarships.

Scholarship

Six Scholars will be selected annually. The funds are a one-time gift of \$3,500 each and must be used for tuition and/or required books, supplies and equipment.

Eligibility Requirements

The scholarships are for graduating high school seniors planning to pursue a degree at an accredited four-year college or university. To be eligible, an ACMA or ICPA member company must employ the applicant's parent or legal guardian of the applicant. IP Corporation employees and their dependents are not eligible for the Scholars Award.

Selection Criteria

The selection of the Scholars is based on all facts and circumstances, with special emphasis placed on the individual's personal merit and financial need. Merit is demonstrated in a variety of ways: academic achievement; leadership in school; civic and other extracurricular activities; motivation to serve and succeed in all endeavors. Financial need is based on expected family contributions and educational expenses.

Selection Committee

The selection committee membership will be comprised of academia, Interplastic staff, association members and staff.

An IP Corporation representative will chair the committee and select committee members. All deliberations of the committee will be confidential and final recommendations will be reviewed by IP Corporation.

To Apply

Students interested in becoming a Scholar may obtain applications via Interplastic Corporation's web site at www.interplastic.com or by contacting:

IP Corporation
Michelle Allhouse/The Scholars Award
1225 Willow Lake Boulevard
St. Paul, MN 55110-5145

Email: mallhouse@ip-corporation.com

All completed applications must be mailed or emailed to Interplastic Corporation no later than March 20, 2026.



Applicant

Please review this form and make certain you have responded accurately to all items.

I certify that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

Printed Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

School Name: _____

ACMA or ICPA Member Company at which your parent, legal guardian or you are employed:

Employee Name: _____ Employee Role: _____

Applicant's Relationship to employee: _____

Company Name: _____

Company Address: _____

Applicant's Signature: _____ Date: _____

Counselor / Principal / Advisor

I have reviewed the applicant's responses and certify that they are correct, insofar as the official school records indicate in items one through five.

Signature: _____ Date: _____

School Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

1. Grade Point Average: _____

If your school uses a grading system weighted to acknowledge achievement in honors or advanced placement classes, please define the weighting system.

2. SAT Score: _____ **ACT Score:** _____

3. Type of Curriculum:

Honors AP CIS/PSEO General/Core Studies Other: _____

School Activities/Achievements

4. Describe school activities in which you have participated:

5. State/National awards and honors:

6. School/Local awards and honors:

7. Name(s) and year(s) of sports participated in, special recognition received, letters earned:

Financial Considerations

8. Combined household income: _____

9. Expected Family Contribution: _____

(This is based on your FAFSA form (SAI) you can request a copy from the U.S. Department of Education after filling out your student aid application. Please enclose a copy or screenshot of report if possible)

10. Please describe any special financial circumstances you would like considered during the selection process:

Community Activities

11. Name(s) and year(s) of community organizations to which you have belonged:

12. Names of organizations/activities for which you volunteer service without pay and the total number of hours you have volunteered for each organization:

13. List any special awards or recognition for your volunteer work:

Employment Activities

14. Please list any jobs, during the past school year, which you have held outside the home, for one month or longer.

Employer Name: _____ **Phone Number:** _____

Employer Address: _____

Hours Worked per Week: _____ Employment Dates: _____

Job Description: _____

Employer Name: _____ **Phone Number:** _____

Employer Address: _____

Hours Worked per Week: _____ Employment Dates: _____

Job Description: _____

15. Please list any summer jobs you have held:

Employer Name: _____ **Phone Number:** _____

Employer Address:

Hours Worked per Week: Employment Dates:

Job Description:

Employer Name: _____ Phone Number: _____

Employer Address: _____

Hours Worked per Week: _____ Employment Dates: _____

Job Description: _____

Educational Plans

16. To which colleges or universities did you apply?

Final Comments

17. Describe any special achievements not previously mentioned.

18. Are there any other relevant factors we should consider?

19. If you are attaching additional pages, how many are attached? _____
Make sure your name is on each page.

20. Did you enclose a copy of your FAFSA (SAI)? _____



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Rights Reserved – IP Corporation intends to fund six scholarships each year (\$21,000 total). However, the Company reserves the right to amend the program, terminate its contribution, or decrease or increase the amount of its annual contribution for future years.