



Massachusetts Association of Insurance Women, Inc.

*You know someone who belongs*

## **2021 MAIW ESTELLE JETER MEMORIAL SCHOLARSHIP**

TO ALL MEMBERS:

Enclosed, please find an application for the 2021 Estelle Jeter Memorial Scholarship Program.

The MAIW Scholarship is offered to any member of MAIW. The MAIW Scholarship Program is overseen by the MAIW Education Committee (MEC). The purpose is to offer assistance to members who have expenses that might not otherwise be paid for elsewhere, and the use must be related to the furthering of education in the insurance field.

The application deadline is **4/1/2021**. This year, MAIW will be awarding **two \$500.00** scholarships and will also be soliciting vendors, companies, and/or agents in the insurance industry which may result in additional scholarships offered to members. The recipients will be formally announced and awarded at the annual MAIW meeting to be held in May 2021. (Please note: Scholarship recipients are not eligible to receive a second scholarship within the next 12 months from the date of receiving a scholarship).

The MEC will review all submitted applications for eligibility. One or two judges will be picked by the MEC. The judge(s) will not be MAIW members. When the applications are received and approved by the MEC to be submitted for judging, all personal information will be redacted and presented to the judges so the judges can make an impartial decision with no knowledge of whom they have picked.

MEC will fundraise during the year to ensure that the allocated funds will grow and allow MAIW to offer more scholarships.

Only fully completed applications will be considered for this award. All applications must be received at the enclosed address by the deadline noted above and on the application itself.

Thank you.

Sincerely,  
MAIW Scholarship Committee

[www.MAIW.org](http://www.MAIW.org)





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## 2021 MAIW Estelle Jeter Memorial Scholarship Application

Application Submission Deadline: 4/1/2021

Applicant's Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Mailing Address \_\_\_\_\_

E Mail \_\_\_\_\_ Chapter \_\_\_\_\_

Employer's Name and Address \_\_\_\_\_

Name of Immediate Supervisor \_\_\_\_\_

Position of Employment \_\_\_\_\_

1) Number of years in the insurance industry: \_\_\_\_\_  
Number of years as a member of MAIW: \_\_\_\_\_

2) List MAIW activities (including offices held, committees served, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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3) Education: List Designations, Licenses, Degrees Held:  
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List or describe courses/programs completed in the past (5) years. Attach a separate sheet if necessary.

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4) Briefly describe the course/program for which this scholarship will be used.

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5) Career goals: Briefly describe your short term and long-term career goals.

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6) How will this course/program help meet your objectives?

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7) List any community service you have performed.

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8) Employment History:

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9) Letter (s) of Recommendation-Optional

Feel free to share letter(s) of recommendation from employers, co-workers. Not Required.

**CERTIFICATION & SIGNATURE:**

I certify that all information provided on this form and supporting material is true and complete to the best of my knowledge.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTIONS:**

The fully completed & signed application can be mailed or e-mailed to:

Kristin Camarra JD, CPIW, CPIA  
Re: MAIW Scholarship  
P.O. Box 201  
Canton, MA 02021  
Phone: 781-702-0573  
Email: [kristincamarra@gmail.com](mailto:kristincamarra@gmail.com)