

Miss Iowa

SCHOLARSHIP PROGRAM

Miss Iowa New Local Preliminary Program License Proposal

Proposed Local Program Name: _____

Proposed Executive Director and Board Members (For each member, please include name, address, email, phone, anticipated Board role, age, employment, and pageant experience, if any.) _____

Do you intend to hold an Open or Closed Program? _____

Open – Any contestant who resides, attends school, or works in the state of Iowa (as defined by criteria of Contestant Contract) is eligible to compete in the Local.

Closed – Any contestant who resides, attends school, or works in the specified geographic region of the local is eligible to compete. FYI – Most programs are open.

If Closed, please indicate the geographic region you intend to specify: _____

Teen Program

What do you anticipate to charge as a fee for Teen contestants? _____

Potential Sponsors

Gifts & Services ~

Monetary Donations ~

Financing Plans

What plans do you have or might you consider for financing purposes?

Contestant Search

Ideas for seeking contestants:

Broad Plans for your Board/Program

Meetings:

Social Media:

Proposed Date & Venue

Potential Date:

Potential Venue:

Additional Comments or Notes: *(Please share any additional ideas, comments, goals for your program.)*

For questions about starting a local or to submit a proposal, please email Rachael Vopatek at president@missiowa.com.