



Scholarship Application

Applicant Information

Last Name	First Name	Middle Initial	Date Of Birth
Address	Unit #	City	State <small>DD/MM/YYYY</small> Zip Code
Phone Number	Email		

Guardian (1) Information

Required if applicant is under 18.

Last Name	First Name	Date Of Birth
Address	Unit #	City <small>DD/MM/YYYY</small> State Zip Code
Phone Number	Email	

Guardian (2) Information

Guardian 2 is optional.

Last Name	First Name	Date Of Birth
		<small>DD/MM/YYYY</small>

Address Unit # City State Zip Code

Phone Number Email

Applicant's Education

High School Address City

State Zip Code Date Started Date Ended Diploma? GED?
MM/YYYY MM/YYYY Yes No If "No" on Yes No
Check One Diploma If Applicable

College Address City

State Zip Code Date Started Date Ended Degree? Type Of Degree
MM/YYYY MM/YYYY Yes No
Check One

Other Education

Applicant's References

Please list 3 references if possible.

Reference's First Name Reference's Last Name Reference's Phone Number

Applicant's Position/Title Company Company Address

Reference's First Name Reference's Last Name Reference's Phone Number

Applicant's Position/Title Company Company Address

Reference's First Name

Reference's Last Name

Reference's Phone Number

Applicant's Position/Title

Company

Company Address

Scholarship Information

Please fill out to the best of your ability.

Have you been diagnosed with Dyslexia?

Yes No
Check One

If "No," will you be seeking a diagnosis in the future?

Yes No
Check One

Are you working with a tutoring company currently?

Yes No
Check One

If "Yes," which company?

When did you begin?

Have you received, or have you requested other financial assistance?

Yes No
Check One

If "Yes," from where?

Mini Essay or Illustration

Attach illustration to this document.

How does having Dyslexia make you feel, and what would tutoring mean to you?

"I certify that my answers are true and complete to the best of my knowledge. If this application leads to a scholarship, I understand that false or misleading information in my application may result in a denial of funding."

Signature _____

Date

Guardian's
Signature _____

Date