



Lifeworks
an Affiliated Chapter of the Arc
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SCHOLARSHIP APPLICATION

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SCHOOL NAME/ADDRESS: \_\_\_\_\_

MAJOR: \_\_\_\_\_ MINOR: \_\_\_\_\_

THIS FALL, WILL YOU BE ENTERING YOUR [ ] JUNIOR OR [ ] SENIOR YEAR OR [ ] GRADUATE SCHOOL?

ARE YOU AVAILABLE FOR AN INFORMAL INTERVIEW IF THE COMMITTEE DESIRES? \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_ YEAR GRADUATED: \_\_\_\_\_

COLLEGE (UNDERGRADUATE): \_\_\_\_\_ YEARS: \_\_\_\_\_

COLLEGE (GRADUATE): \_\_\_\_\_ YEARS: \_\_\_\_\_

HUMAN SERVICE EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_
\_\_\_\_\_

VOLUNTEER EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_
\_\_\_\_\_

REFERENCES: (Please submit the names of 3 persons (not in your immediate family) as references. Include Name, Address, Phone Number, Email Address and Position.

- 1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please attach any additional information that you think may be relevant and helpful to the committee. Be sure your name is on each sheet. This form and attachments must be received by May 15th to be considered for the upcoming school year. Applicants must be a college Junior or Senior or a Graduate Student, with a Major in Special Education or a related field only. Preference will be given to (1) applicants who have not previously received one of these scholarships and (2) applicants who have a strong connection to the geographic area served by Lifeworks. Only those awarded scholarships will be contacted by Lifeworks.