



The Governor's Coalition for Youth with Disabilities Scholarship Application

Deadline: Applications must be postmarked or received by February 17, 2012

Part One: Student Information

THIS APPLICATION IS FORMATTED FOR **HANDWRITTEN** PRINT. IF YOU WOULD LIKE TO TYPE YOUR APPLICATION, PLEASE USE THE "TYPE" FORMAT PROVIDED ON THE WEBSITE

Today's Date: _____

Student Name: _____ Are you a U.S. Citizen: Yes No

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ E-mail: _____

Date of Birth: _____

High School Name: _____ School Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Principal's Name: _____ School Counselor's Name: _____

Please list all schools/post-secondary training programs to which you have applied in order of preference (1st choice, 2nd choice, etc.). If you have already been accepted to any of the schools/training programs listed, please note that as well. You do not need to include schools/training programs to which you have applied and have not been accepted.

1. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted
2. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted
3. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted
4. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted
5. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted
6. School Name: _____ City/State: _____
 Applied/Waiting Decision Accepted



Some state agencies sponsor specific GCYD scholarships for high school students with whom they currently work. If you are a consumer of any of the following agencies and would like to be considered for one of these designated scholarships, please check off the appropriate state agency here and provide your counselor's name:

BRS BESB DDS DSS Counselor/Worker: _____

Part Two: Contributions to School and Community

In the box below, briefly highlight the activities in which you participate in school, the community and/or at work. Please address the following: 1.) How has your participation in these activities contributed to your school or community? 2.) How have you acted as a leader or positive role model for other students as a result of your participation? 3.) What skills or experience have you gained that will help you as you move forward with your educational and vocational goals? *You can attach one additional page, if necessary.*



In the box below, please describe any awards, honors, or other special recognitions you have achieved.

Please attach a transcript from your school as well as *at least* one letter of recommendation from an adult in your school, community and/or work environment.

Part Three: Personal Essay

The Personal Essay must be double-spaced, typed in 12 font Times New Roman, and have margins no larger than 1.25 on all sides. Essays must be a minimum of 2 pages and maximum of 4 pages. Please address the following items in your essay:

- Describe your disability in your own words. To help you with this, pretend you are describing this to someone who may need to assist you in some way but who knows nothing about the disability. What would they need to know about your disability and how you experience it for them to really understand and assist you?
- Describe how your disability has impacted your life experiences and provide at least one example of how you managed that impact in order to overcome a challenge in each of the following groups/situations:
 - Within your family environment,
 - While at school and/or work, and
 - Among your peers and friends
- How will you use what you have learned from the experiences above as you move forward through school and adulthood?
- Discuss your intended Major or specific occupational skill that you would like to pursue in school. If you are still undecided at this point, discuss areas of study that you are considering. What is it about this area or areas of study that are interesting to you?



Part Four: Student Consent and High School Certification

IMPORTANT! Please read and sign below:

Student Consent:

To the best of my knowledge, all information submitted in this application is accurate. I authorize use of any information in this application and/or my photograph, image, voice or words in connection with any activities and/or publicity by the Governor's Coalition for Youth with Disabilities (GCYD). I also authorize GCYD to release the name and/or nature of my disability. I understand that the GCYD Scholarship program is a competitive process and not all applicants will be awarded a scholarship.

Student's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____
If student is under 18 years of age

High School Certification: Authorized signature required

I certify that the information provided in this application is accurate and the applicant is a permanent Connecticut resident. I also certify that the applicant's disability meets the eligibility criteria under Special Education law or Section 504 of the Rehabilitation Act of 1973.

Signature & Title of School Official: _____ Date: _____

Phone: _____ Fax: _____

E-mail: _____



Application Checklist

Before you submit your application, make sure you:

- Fully complete Parts 1 and 2 on the application form.
- Attach a school transcript
- Attach at least one letter of recommendation
- Complete and attach the Personal Essay following the instructions provided in Part Three
- Sign the application and have your parent/guardian sign if you are under 18
- Have your school sign to certify that you qualify as having a disability

**PLEASE MAKE SURE THAT ALL PARTS ARE COMPLETED -
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

Deadline: Applications must be postmarked or received by February 17, 2012. Applications sent by mail that are postmarked after this date will not be considered for a scholarship.

YOU MAY SUBMIT YOUR APPLICATION IN ONE OF TWO WAYS:

Mail a hard copy with attachments to:
Governor's Coalition for Youth with Disabilities
P.O. Box 2485
Hartford, CT 06146-2485

OR

Scan and email the completed application and attachments to:
gcydinfo@gmail.com

For the latest GCYD updates, visit us at our website, www.gcyd.org, or check us out on Facebook!



Demographics

The requested information is completely voluntary and will be kept separately from your application. If completed, the information will be kept confidential and only used for statistical purposes.

Sex:

- Male
- Female

Ethnicity:

- White
- Hispanic / Latino
- Black / African American
- Asian
- Native American / American Indian
- Other _____

Yearly Household Income (Scholarship awards are not based on Household Income):

- Less than \$25,000
- \$25,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,000
- \$100,000 or Over

Age at Time of Application: _____

Disability: _____



Questions and Answers about GCYD Scholarship Application Process

WHAT IS THE ELIGIBILITY CRITERIA THAT IS REQUIRED TO APPLY FOR A SCHOLARSHIP?

To be eligible to apply for a GCYD Scholarship, the student must meet the following criteria:

- Is currently a graduating high school senior planning to attend a post-secondary school or training program
- Is a permanent resident of Connecticut (CT residents attending high school outside of the state are eligible)
- Has a disability under Special Education Law or Section 504 of the Rehabilitation Act of 1973

HOW ARE SCHOLARSHIP WINNERS SELECTED?

All applications are reviewed by a panel of judges. Scholarship recipients are selected based on a number of factors including:

- Completeness of application and ability to follow application instructions including adhering to page limits and specification as well as including the required attachments
- The manner in which candidates have managed their disabilities to address obstacles in the various aspects of their life
- The degree to which the candidates have contributed to their school and community through service, leadership and being a positive role model
- The candidate's desire for a successful career

Additional information about the scholarship may be found at www.gcyd.org or email questions to gcydinfo@gmail.com