Blind United Scholarship Application Form

Personal Information:

1.Full Name:

2.Date of Birth:

3.Contact Information (Email, Phone):

4.Mailing Address:

Educational Background:

5.Current College/University:

6.Major/Area of Study:

7.Current GPA:

8.Expected Graduation Date:

Essay Section:

Please provide a brief essay (300-500 words) addressing the following:

9.Share your academic and personal journey, highlighting any challenges faced as a blind student.

10.Describe your academic and career goals and how this scholarship will support your aspirations.

11.Discuss any extracurricular activities, community involvement, or advocacy work you are engaged in.

Recommendation:

12.Please provide contact information for a professor, mentor, or community leader who can attest to your character and achievements.

Documentation:

13.provide medical documentation or certification of blindness or severe visual impairment, such as a statement from a medical professional or an eye specialist.

14.Attach a copy of your most recent transcript.

15.Optional: Include any additional materials highlighting your achievements, such as awards, publications, or relevant projects.

Accessibility Requirements:

16.Outline any specific accommodations or technologies you currently use or would benefit from to enhance your academic experience.

Declaration:

By submitting this application, I affirm that the information provided is accurate and authentic. I consent to the use of my essay and application details for promotional purposes related to the scholarship.

Submission Deadline:

March 1, 2024

Please submit your application via email to [info@blindunited.org](mailto:info@blindunited.org) with the subject line “(Blind United Les Subotnick scholarship your name.] Late applications will not be considered.

Selection Process:

Applications will be reviewed by our scholarship committee, considering academic achievements, personal statements, and letters of recommendation.

Shortlisted candidates may be invited for an interview.

Award Amount The selected recipient will receive [Specify Amount], which will be directly applied to cover educational expenses.

We appreciate your interest in the Scholarship and wish you the best in your academic pursuits.