

## **LITERACY SCHOLARSHIP 2021**

This locally sponsored \$500.00 scholarship is available to current high school seniors who will be graduating this spring.

The purpose of this scholarship is to recognize and honor achievement and service of students in acquiring and/or improving literacy skills (i.e. reading, writing, spelling, comprehension and oral language and expression) that have a learning disability or suspect they have a learning disability. Selection is based on student responses on the application, which is lengthy but not difficult. Applicants need not meet class rank, financial need, grade point or other common criteria to qualify. You must have a learning issue to receive this scholarship.

Information and applications are available in the High School Office (387-2271, ext. 602).

Deadline for returning applications is April 7, 2021 – 3 pm.

Note: Any or all of this application process can be accommodated and/or modified in any way that will make it possible for you to qualify (scribing, typing, oral presentation or other). Contact the counselor's office (387-2271) or Beth Kennedy (387-1314) for further information.

# LITERACY SCHOLARSHIP APPLICATION

Do you have a learning disability or suspected learning disability?

Yes

A (Describe your challenges)

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B (What you have done to address these challenges- effective accommodations you currently use or will need in your future education)

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No (You are not eligible for this scholarship)

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

## SECTION I: BACKGROUND

1. What are your plans for school next year?

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**What school or program have you been accepted to?**

List name, address and phone of school you are accepted to:

School Name \_\_\_\_\_

Program (Major/Minor/Degree) \_\_\_\_\_

Expected start date \_\_\_\_\_

2. Name your learning strengths - characteristics, experiences and/or strategies that have helped you.

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

3. List what you have done that has helped others to improve their literacy skills. How have you helped others.

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

4. State why you feel you want this scholarship.

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

Please Note:

If you are a scholarship or award winner we would like to have your picture for the local newspapers and for possible future use publicizing the Literacy Scholarship.

If you are willing to give permission please sign your name below

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date