



## Application Student Scholarship Program for 2019

Self-Reliance, Inc. is a Center for Independent Living operating in Hillsborough County, Florida for the benefit of men, women, children and families with any type of disability. Our mission is to promote independence by empowering people with disabilities and improving the communities in which we live.

**Deadline:** This application form and all required documentation must be received by July 31, 2019 (4:00 p.m. eastern time). Email to: [srievents@self-reliance.org](mailto:srievents@self-reliance.org) or fax to 813-375-3970. For questions, please e-mail: [mpineda@self-reliance.org](mailto:mpineda@self-reliance.org). Website: [www.self-reliance.org](http://www.self-reliance.org).

**Eligibility:** Applicants must meet the following criteria to be eligible:

1. Must have a documented disability.
2. Primary residence is in Hillsborough County, Florida.
3. Must have a minimum semester or overall GPA of 2.50.
4. Must be accepted to or attending an accredited educational institution or technical school. This accredited educational institution or technical school can be located outside of Hillsborough County, Florida. However the applicant's primary residence must be in Hillsborough County, Florida. For profit educational institutions are excluded for this scholarship program.
5. Must include a maximum 500 word essay with this application.

**6. Name:**

a. First name, Middle name(s), Last name:

\_\_\_\_\_

- 7. Home address:** The SRI Scholarship Program is restricted to residents who live in Hillsborough County, Florida. Proof of residence must be included with this application and can include State of Florida issued driver's license, State of Florida issued identification card or a current utility bill (within the last month).

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**8. Primary telephone:** (\_\_\_\_\_) \_\_\_\_\_

**9. Secondary telephone:** (\_\_\_\_\_) \_\_\_\_\_ **Extension:** \_\_\_\_\_

10. E-mail: \_\_\_\_\_

11. Date of Birth (MM/DD/YYYY): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

12. Do you have a documented disability? \_\_\_\_\_ Yes \_\_\_\_\_ No

Proof of a disability must be included with this application and can include a recent Social Security Income Statement or other acceptable documentation.

13. What is your current GPA? \_\_\_\_\_

Minimum GPA or overall GPA of 2.50 is required. Proof of GPA average must be included with this application and can include transcripts from attending educational institution or technical school. Graduating high school students must provide transcripts from graduating high school. Copies are acceptable.

14. What accredited educational institution or technical school do you currently attend or have been accepted, and will attend in the fall of 2019: If currently graduated from high school please include the acceptance letter from educational institution or technical school that you will be attending. If currently enrolled in an educational institution or technical school please provide documentation indicating attendance of at least part-time basis. (A minimum of 6 credit hours for the last semester)

a. Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

15. Classification in fall semester 2019: \_\_\_\_\_

(Freshman, sophomore, junior, senior, graduate, doctoral student)

16. What degree(s) are you pursuing: \_\_\_\_\_

17. What profession or field of employment do you wish to enter with your college or technical degree: \_\_\_\_\_

18. The Essay:

What does the scholarship committee need to know about you in 500 words or less? The committee members will be especially interested in your current and future academic and professional goals. Attach your essay to this form. The essay is limited to no more than 500 words.

19. Certification Statement:

By signing my name below, I confirm that all of the information provided above and in the accompanying documents are true and correct to the best of my knowledge.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_