# **Achievements and Abilities Scholarship Application Form**

One scholarship for financial assistance in the amount of \$1,500 financial aid to be awarded to one undergraduate or graduate university student with cerebral palsy or an immediate family member with cerebral palsy.

APPLICANT INFORMATION
Name (Last, First, Middle):
Are you a U.S. citizen or otherwise authorized to work in the United States?YesNo
Name and city of the university you are attending or are planning to attend:
Current mailing address (Street, Apt. # City, State, Zip code):
Telephone #:
E-Mail:
<b>ESSAY REQUIREMENTS:</b> A 1-3 page essay reflecting on how cerebral palsy (your cerebral palsy or an immediate family member's cerebral palsy) has affected your life.
Michigan Cerebral Palsy Attorneys will use each applicant's essay in a series displaying real stories related to living with cerebral palsy. Do you give us permission and copyright to use your essay story on our website? Circle <b>Yes</b> or <b>No</b>
If you circled yes, how would you like attribution? Please circle one:

Full Name or First Name & Last Initial

# **ACADEMIC INFORMATION**

Schools	Address	Dates Attended	Degree/Major	Graduation Date		
	<u> </u>					
Current Major(s):						
Highlight honors or awards that you have received:						
Is there any other r	Is there any other relevant information you want us to consider when reviewing your					
application?						
application:						
Please tell us how you learned about our scholarship program:						

# **ELIGIBILITY**

- This scholarship will be awarded to an undergraduate or graduate student at an
  accredited university. This student must personally have cerebral palsy or be
  immediately related to someone with cerebral palsy.
- To be considered eligible for the scholarship, the candidate must submit a 1-3 page typed essay regarding how cerebral palsy has affected his or her life.
- Candidates must be full time students and have current grade point averages of 3.0 or higher.
- Scholarship is not available to present or future clients of Michigan Cerebral Palsy Attorneys.

#### **ESSAY INSTRUCTIONS**

Please see the website www.michigancerebralpalsyattorneys.com/scholarship for essay information and submission documents with application.

#### **AWARD**

- Scholarship is to be used exclusively for university tuition and related academic expenses.
- A check for \$1,500 will be made payable to the award recipient's university for the sole purpose of these expenses.
- The award recipient will provide the following documentation in order to obtain the scholarship:
  - 1. A letter or other documentation from a qualified medical professional attesting to his or her diagnosis (or the diagnosis of a family member).
  - 2. Proof of Legal Residency in the US (i.e. birth certificate, passport, permanent resident card, etc.)
- Recipient is expected to submit receipts in accordance with IRS regulations.
- Award recipient will be notified of the selection by August 31, 2016.

# **CERTIFICATION**

The undersigned scholarship applicant hereby grants permission to use his/her name and to quote his/her essay (in whole or in part) or use his/her entry (in whole or in part) in all promotional and other activities relating to the scholarship, including, but not limited to, publication in written materials, posting on websites and other social media platforms, and use in radio and television broadcasts. In the event that a scholarship applicant participates in any promotional or other activity relating to the scholarship, the applicant authorizes Michigan Cerebral Palsy Attorneys to use, re-use, publish, re-publish, and copyright audio and/or visual reproductions of the applicant's voice and/or image, alone or with other persons, with or without use of the applicant's name.

Any taxes on scholarship are the sole responsibility of the contestant.

I hereby certify that the information I have provided on this Application Form and in any attached materials is true and complete.

Applicant Signature:	 	
Date:		

# **REQUIREMENTS**

Applicant and materials must submit essay and application (found on website) by July 31, 2016.

Completed application and materials should be mailed to:

Michigan Cerebral Palsy Attorneys 122 Concord Rd., Suite 100 Bloomfield Hills, MI 48304 Attn: Krissy Pollock

Note: This application and supporting material must be received by July 31, 2016. Notification of the scholarship award decision will be by August 31, 2016.