

BLUMBERG CENTER SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Date

Last Name

First Name

Street Address

City

State

ZIP

Home Phone

Cell

E-mail

Intended Major:

Special Education

Communication Disorders

References

Please provide the name and contact information for the three individuals who have agreed to provide a recommendation for you. (High school counselor, teacher, civic leader, employer, clergy, coach, etc.). It is the applicant's responsibility to provide the Blumberg Center Scholarship Recommendation Form to each person listed below. The forms may be submitted either by the person providing the reference or by the applicant in a sealed, signed envelope.

Full Name

Relationship

Profession

Phone

E-mail

Address

Full Name

Relationship

Profession

Phone

E-mail

Address

Full Name

Relationship

Profession

Phone

E-mail

Address

Personal Essay

- a) Describe your work or volunteer experience and the connection to your professional interests in working with individuals with special educational needs or communication disorders.
- b) Discuss how personal characteristics, such as leadership ability, communication skills, interpersonal skills, dependability, and creativity will enhance your academic and professional performance.
- c) Discuss your professional goals.

The Scholarship Application should be sent to the address below and must be postmarked by February 1, 2011. The three Recommendation Forms must also be postmarked by February 1, 2011. Transcripts and evidence of SAT/ACT scores will be obtained from your application for admission through the Indiana State University Office of Admissions.

Applicant's Signature

Return Application to:

Leah Nellis, Director

Blumberg Center for Interdisciplinary Studies in Special Education

Indiana State University, College of Education

401 North 7th Street, UH Room 009W

Terre Haute, IN 47809