

***RALEIGH MAYOR'S COMMITTEE FOR PERSONS WITH DISABILITIES  
2016 SCHOLARSHIP APPLICATION***

The Raleigh Mayor's Committee for Persons with Disabilities will award two \$1000 scholarships to students with documented disabilities. Applicants must be **residents** of the City of Raleigh and must be enrolled in or have been accepted to an **accredited** undergraduate post secondary school, college, trade school or other institution of higher learning.

The selection of scholarship recipients shall be based upon academic performance, financial need, character, school and community activities, honors or awards, and ability to express him/herself in written form, personal motivation and/or leadership potential.

***1. Applicant Data***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ (optional)

***2. Type of Scholarship Applying for:***

*(Please check only one)*

\_\_\_\_\_ Academic

\_\_\_\_\_ Vocational

***3. Parent or Guardian Information***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Parent or Guardian's Signature: \_\_\_\_\_

I certify that all information in this scholarship application is true and accurate to the best of my knowledge.



## 7. Honors

List honors or awards received and corresponding dates.

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## 8. Goals and Objectives

On a separate sheet of paper, write an essay telling why you feel you deserve this scholarship. Please include your educational and/or career goals and objectives. Essay must be typed and must not exceed 400 words.

## 9. Applicant's Signature:

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

I certify that all information in this scholarship application is true and accurate to the best of my knowledge.

## 10. Materials to be Included

For your application to be considered, your application materials must include **official copies** of all high school or (if applicable) undergraduate transcripts and a copy of your **college acceptance letter**. Your application and all supporting documents must be **received** by:

**May 31, 2016 at 5:00 PM**

**Please send completed application and supporting documents to:**

Community Services  
Raleigh Mayor's Committee for Persons with Disabilities  
Attention: Lori Millette  
Scholarship Selection Committee  
310 West Martin Street, Suite 201  
P.O. Box 590  
Raleigh, NC 27602

For questions, please call Lori Millette at 919-324-1128

[Lori.Millette@ncdps.gov](mailto:Lori.Millette@ncdps.gov)