



Learning Disabilities Association of Iowa 5665 Greendale Rd., Ste. D, Johnston, IA 50131 (515) 280-8558 <u>LDAIowa.org</u>

2017 LEARNING DISABILITIES ASSOCIATION OF IOWA SCHOLARSHIP INFORMATION AND APPLICATION FORMS

The Learning Disabilities Association of Iowa (LDA-IA) will award three scholarships to Iowa high school seniors who plan to enroll in postsecondary education (college or vocational) in the fall of 2017.

Description

The scholarships are to assist graduating seniors with learning disabilities in pursuing a post-secondary education at an accredited institution which provides:

- a two or four year college program, or
- vocational training

Students served solely under Section 504, or with primary disabilities other than LD (e.g. Autism), will not be eligible for these scholarships.

Number and Amount

Three scholarships valued at \$500 each will be awarded:

- One Membership based scholarship will be awarded to an applicant who meets one of the following requirements:
- Applicant is a current member of LDA
- Applicant's parent is a current member of LDA
- Applicant is recommended in writing by a current member of LDA.

Information about LDA membership is available on the website. Annual dues include membership in the Learning Disabilities Association of America and LDA-IA.

• Two **At-Large** scholarships will be awarded. Preference will be given to applicants who meet any of the membership requirements listed above.

Payment Procedures

After receiving proof of enrollment, a check for \$150 payable to the student will be sent. After receiving proof that the recipient has completed vocational training or the first full-time year of study, the remainder of the scholarship, \$350, will be paid to the student.

Application Deadline

Scholarship recipients will be selected from applications that have been **postmarked** no later than **March 31, 2017**.

Scholarship winners will be notified by phone and then announced May 8th on the LDA-IA website (www.ldaiowa.org).

2017 Learning Disabilities Association of Iowa Scholarship for High School Seniors Application Instructions

THE APPLICATION MUST INCLUDE THE FOLLOWING SIX COMPLETED

DOCUMENTS (seven documents if including a member recommendation):
1. Scholarship application form completed (see form on pg. 3)
2. Entire current IEP*
3. Student essay**
4. Letter of recommendation from a person (excluding family members) who can provide personal and academic insight
5. High school grade transcript or recent report card
6. Publicity form (see form on pg. 5)
7. LDA member recommendation (see form on pg. 4) if applying for the membership-based scholarship through member recommendation
**STUDENT ESSAY REQUIREMENTS This essay must be included with the application to be considered for the scholarship. The essay
should include all of the following:
Extra-curricular and community achievements
Volunteer and paid jobs
The nature of your disability and how it impacts your life
Accommodations and learning strategies that are beneficial to you and will help you succeed in your post-secondary education
Explain methods of financing your education and how the scholarship will assist your education plan
Your essay will be read only by scholarship committee members and treated with confidentiality.

SEND THE COMPLETED APPLICATION TO:

Patty Beyer, Scholarship Co-Chairperson 1741 100th St. Holstein, Iowa 51025

Phone: 712-368-4847

Email: pbeyer33@gmail.com

2017 Learning Disabilities Association of Iowa Scholarship for High School Seniors <u>STUDENT APPLICATION FORM</u>

I understand that all of the information on this application will be available to each member of the LDA-IA Scholarship Committee. I understand that if I am awarded this scholarship, my name will be sent to my local newspaper, and announced in LDA-IA social media and website and at the annual LDA-IA conference in October. The information is accurate and complete within my ability to provide the information requested.

Signature of Applicant
Scholarship applicant please complete the following:
Name
Phone
Address
Email
Parents' or Guardians' Names
Parents or Guardians Complete Address
Career Goals
Educational Plans
High School Attended
College Courses/Challenging Classes taken in High School

LDA Member Recommendation

Student's Name:		
LDA Member's Name:		
Please write a brief description of why you feel this person would be a good candidate for the LDA-IA Scholarship:		

SEND THE COMPLETED LDA MEMBER RECOMMENDATION TO:

Patty Beyer, Scholarship Co-Chairperson 1741 100th St. Holstein, Iowa 51025

Phone: 712-368-4847

Email: pbeyer33@gmail.com

Learning Disabilities Association of Iowa PUBLICITY FORM

Dear Scholarship Applicant:

We are so pleased that you are applying for a LDA-IA Scholarship. Please fill out the information below so that in the event you are a winner, we can publicize your honor in your local and/or regional newspapers. No publicity material will identify you as a student with learning disabilities, only that you have won a scholarship.

We also would like to use your picture, the name of your school, and your field of studies in our publicity. This information would also be included in LDA-IA social media, at our LDA-IA Conference in October and on our website: http://www.ldaiowa.org.

Please fill out the following information and enclose it with your scholarship application.

Name:_		
	S:	
Parent(s) name(s):		
High School:		
College/vocational school you plan to attend:		
Name(s) and address(es) of your hometown and/or regional newspaper(s):		
	of Newspaper:	
Name of Newspaper:		
C	Complete Mailing Address:	
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Thank you and best wishes on your application.

Sincerely,

The Scholarship Committee