APPLICATION FOR KEATON WALKER SCHOLARSHIP 2018 – 2019

*** DEADLINE FEBRUARY 15, 2018 ***

This scholarship is available to all eligible students with a visual or physical disability. Preference will be given to students who are blind or low vision. For 2018 - 2019, the scholarship will be $500-$1,000.00.

To be considered for this scholarship, you must complete the following:

☐ Admitted as a current matriculated (degree seeking) student by February 15, 2018.
☐ Registered with the Center for Disability and Access (CDA), and be found eligible for services under the University Americans with Disabilities Act standards in order to be eligible for consideration of scholarships. The Center for Disability and Access has been designated by the University of Utah as the official office to provide reasonable accommodations to students that qualify under the Americans with Disabilities Act. Please contact CDA to meet with an advisor.
☐ Submit an academic transcript (official or unofficial) from all colleges attended if you are a college student or from your high school if you are an entering freshman. A DARS report is acceptable for University of Utah Students.
   Minimum cumulative 2.5 GPA required
☐ Provide one letter of recommendation from someone acquainted with your academic record (not a family member). The individual completing the letter of recommendation may submit the letter themselves to be included with the scholarship application.
☐ Complete a FAFSA (Free Application for Federal Student Aid) application. Here is the link: https://fafsa.ed.gov
☐ Submit a typed personal statement to include: academic and career goals, how you have used your disability as an example in a positive way, what volunteer or community service you have participated in and financial need.
☐ Scholarship is for Fall and Spring semester. The recipient must receive a minimum 2.5 GPA for Fall term to retain the scholarship for Spring term. The student may take as many credit hours as desired. Enrolling less than full-time requires approval from CDA.
☐ Grade point average, financial need, community participation, academic goals, and a letter of recommendation will be considered in the selection process. All applicants will be notified by May 1st via mail.

Note: If needed, you are encouraged to contact both departments immediately to allow suitable time to meet the scholarship requirements.

University of Utah
Center for Disability and Access
162 Union Bldg
(801) 581-5020 (Voice)
(801) 581-5487 (FAX)
http://disability.utah.edu

University of Utah
Admissions Office
250 Student Services Bldg
(801) 581-7281
www.sa.utah.edu/admiss
To apply, complete below and submit all materials to:

Sid Davis
UNIVERSITY OF UTAH
CENTER FOR DISABILITY AND ACCESS
200 SOUTH CENTRAL CAMPUS DRIVE, UNION 162
SALT LAKE CITY, UT 84112-9107
801-581-5020 (Voice) FAX 801-581-5487
Email to: sdcopal@sa.utah.edu

Check one
[ ] Entering Freshman [ ] Continuing Student [ ] Graduate Student [ ] Transfer Student

Minimum cumulative GPA of 2.5 Required

If continuing U of U student, list the most recent semester attended ______________________

Name ________________________________

Address ______________________________

City State ZIP code ______________________________

Phone ( _____ ) ____________________ U of U ID ______________________________

Email ______________________________

Center for Disability and Access Advisor ______________________________

Have you received a scholarship before from our office? If so, which one(s) and year(s)

______________________________________________________________

By signing this application, I certify under penalty of perjury that I am either a United States citizen or a citizen of another country who is lawfully present within the United States. I understand that the University of Utah is required by law to verify my lawful presence within the United States through the Department of Homeland Security (DHS) prior to an award of this scholarship. Once the University submits a student’s information to DHS for verification, this federal agency may have the legal right to share the information with other government agencies.

Signature ________________________________

Date ________________________________

[ ] Transcript(s) [ ] Recommendation Letter [ ] Financial [ ] Personal Statement

Available in alternative format