

DISABILITY SERVICES

University Plaza
Atlanta, GA 30303-3083
Phone: 404/413-1560 voice/TTY: 404-413-1564
Fax: 404/413-1563



J.B.S. SCHOLARSHIP

PERSONAL INFORMATION FORM

PLEASE TYPE OR PRINT NEATLY IN INK

APPLICANT NAME _____ SSN _____

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP)

PHONE NUMBER (INCLUDE AREA CODE) _____

MAJOR _____ COLLEGE OR DEPT. _____

CLASSIFICATION **FOR FALL 2008** __SOPH __JR __SR __ GRAD CUMULATIVE GPA _____

BRIEFLY DESCRIBE YOUR DISABILITY _____

ARE YOU CURRENTLY REGISTERED WITH DISABILITY SERVICES AT G.S.U.? __ YES __ NO

COMMUNITY ACTIVITIES WITHIN THE LAST 3 YEARS

COMMUNITY/UNIVERSITY LEADERSHIP POSITIONS WITHIN THE LAST 3 YEARS

HAVE YOU APPLIED FOR FINANCIAL AID AT GSU FOR THE 2008-2009 SCHOOL YEAR? __ YES __ NO

DID YOU RECEIVE FINANCIAL AID FOR THE CURRENT SCHOOL YEAR? __ YES __ NO

IS YOUR STUDENT FINANCIAL AID REPORT ATTACHED TO THIS APPLICATION? __ YES __ NO

BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ AND UNDERSTOOD THE ELIGIBILITY REQUIREMENTS FOR THIS SCHOLARSHIP AND THAT TO THE BEST OF YOUR KNOWLEDGE YOU MEET THESE REQUIREMENTS. YOU ARE ALSO VERIFYING THAT INFORMATION GIVEN IN THIS APPLICATION IS COMPLETE AND ACCURATE.

IF I AM ACCEPTED AS A RECIPIENT OF THE J.B.S SCHOLARSHIP, I GIVE PERMISSION FOR THE AWARDS COMMITTEE TO RELEASE MY NAME. IN DOING SO, I REALIZE THAT I WILL BE IDENTIFIED AS A STUDENT WITH A DISABILITY. ____ YES ____ NO

PLEASE INITIAL _____

APPLICANT'S SIGNATURE _____ DATE _____

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RECOMMENDATION FORM

TO THE APPLICANT: PLEASE PRINT YOUR NAME AND SOCIAL SECURITY NUMBER BELOW, THEN GIVE THIS FORM TO YOUR EVALUATOR (non-family member) TO COMPLETE. IT IS YOUR RESPONSIBILITY TO ENSURE THAT THIS FORM IS RETURNED TO DISABILITY SERVICES BY **April 11, 2008**.

STUDENT NAME _____ SSN _____

TO THE EVALUATOR: PLEASE COMPLETE THE EVALUATION MATRIX BELOW AND ATTACH A LETTER OF RECOMMENDATION FOR THIS STUDENT, THEN RETURN IT TO DISABILITY SERVICES BEFORE **April 11, 2008**.

	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCELLENT	NO BASIS FOR JUDGEMENT
MOTIVATION					
CREATIVITY					
ACADEMIC SELF DISCIPLINE					
LEADERSHIP					
EMOTIONAL MATURITY					
PERSONAL INITIATIVE					
REACTION TO SETBACKS					
INTEGRITY					
SELF-CONFIDENCE					
POTENTIAL					
GOAL-ORIENTED					
COMMUNICATION SKILLS					
INTERPERSONAL SKILLS					
OVERALL ASSESSMENT					

IN WHAT CAPACITY DO YOU KNOW THE APPLICANT? COLLEGE PROFESSOR HIGH SCHOOL TEACHER
 CO-WORKER SUPERVISOR

HOW LONG HAVE YOU KNOWN THE APPLICANT? _____ COURSE TAUGHT OR NAME OF WORKPLACE _____

EVALUATOR'S NAME _____ TITLE _____

SIGNATURE _____ DATE _____

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JBS SCHOLARSHIP INSTRUCTIONS FOR COMPLETION OF APPLICATION

- Applications must include a completed Personal Information Form
- Applicants must attach a transcript for all college level classes (does not have to be official)
- A minimum of two completed recommendation forms **with accompanying letters of recommendation**, must arrive at Disability Services on or before **April 11, 2008**. One recommendation must be from a professor in the college of your major. The other recommendations can be from another professor, a high school teacher (if you are an undergraduate), a co-worker or a supervisor. Must use a different essay from previous years, and cannot use essay from a previous scholarship application. Your essay should reflect the progress you have made in your academic and career objectives during the past year. It is suggested that students make use of all writing resources available (writing labs, tutors, etc). ODS staff cannot assist students with their essays.
- A copy of your Student Aid Report (you will receive this form from Federal Financial Aid a few days after you apply)
- All applications must include a 500-1000 word essay addressing **all** the following questions:
 1. Your current academic and career objectives
 2. How your disability impacts on your ability to achieve those objectives
 3. How would this scholarship assist you in attaining these objectives
 4. If you do not receive this scholarship, what alternatives will you use to assist you in achieving those objectives
 5. How/when/where have you demonstrated your leadership skills and community involvement.
- **To be considered for the award, applicants must submit a complete original application (including all components mentioned above) plus 7 copies to Disability Services on or before April 11, 2008. Please note: copies of this application will not be made at Disability Services. Applicants are responsible for making copies of their recommendation letters and forms. These are NON-CONFIDENTIAL recommendation forms and letters.**

AWARDS

Awards will become effective during fall semester 2008. The actual number and amount of individual awards will be at the sole discretion of the Awards Committee. The awarded money will be placed into the recipient's student account in two equal payments at the beginning of the fall 2008 semester and again at the beginning of the spring 2009 semester. The scholarship award is contingent upon the recipient's acceptance to, or continuation in, a Georgia State graduate or undergraduate program. All application documents will become the property of the Awards Committee.

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J.B.S. SCHOLARSHIP

ELIGIBILITY CRITERIA

TO BE ELIGIBLE TO APPLY FOR THE J.B.S. SCHOLARSHIP AN APPLICANT:

- Must be a currently enrolled student at GSU.
- Must have a documented disability and be registered with the Office of Disability Services at GSU.
- Undergraduate students must be full time equivalent and have a GPA of 2.5 or higher.
- Graduate students must be full time equivalent and have a GPA of 3.0 or higher.
- Must have applied for Federal Financial Aid and have a copy of the Student Aid Report.
- Must have demonstrated leadership skills (i.e. involvement in community activities, clubs, and organizations).

DETERMINATION OF RECIPIENTS

To determine recipients of the J.B.S. Scholarship, the Awards Committee will assess each applicant in the following areas: academic achievement, demonstrated leadership skills, economic need, and severity of impact of the disability on their academic and vocational activities. If the needed information is missing or isn't adequately addressed in the application, points will be deducted.

Finalists will be notified by telephone and will be scheduled to meet with the committee. In the event that the applicant cannot be reached, they will be deemed ineligible. Finalists who fail to appear for the interview will also be deemed ineligible.

The determination of the Awards Committee will be final.