



Hope 4 Autism

**HOPE 4 AUTISM
SCHOLARSHIP PROGRAM
FOR MINERAL AREA COLLEGE
Fall 2023 APPLICATION FORM**

Deadline: This application form and all other required documentation must be received by August 1, 2023 (5:00 p.m. eastern time). Mail to: Hope 4 Autism, 117 E Columbia Street Farmington, MO 63640. Questions? Call (573) 664-1711 10-5 Tuesday – Friday or e-mail: Luann@hope4autism.org. Website: www.hope4autism.org.

Required fields are indicated by an asterisk (*).

Eligibility: Students must meet these criteria to be eligible. Please initial.

1. ____* I confirm that I have an educational and/or medical diagnosis of autism.
2. ____* I live in the United States.
3. ____* I will be attending Mineral Area College in the Fall of 2023.

4. ***Name:**

a. First name*-- Middle name(s) -- Last name*

b. If it is different than your formal name, what do you prefer to be called?

5. ***Home address:**

*Address: _____

Address: _____

*City: _____ *State: _____ *ZIP: _____

6. ***Primary telephone:** (_____) _____

7. **Secondary telephone:** (_____) _____ **Extension:** _____

8. **E-mail:** _____

9. ***Date of Birth (MM/DD/YYYY):** ____/____/____



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10. *What school do you currently attend?

*Name: _____

*City: _____ *State: _____ *ZIP: _____

Phone number: (_____) _____

*What is your current GPA?: _____

11. *What degree(s) are you pursuing?

12. *What profession or field of employment do you wish to enter with your college degree?

13. *Anticipated year of college graduation: _____

14. *The Video:

What does the scholarship committee need to know about you in 1,000 words or less? The committee members will be especially interested in these points:

- Your most notable qualities
- Your attitude about autism
- Examples of your demonstrated leadership ability
- How this scholarship will help you

Email your video along with this form to Luann@hope4autism.org. The video is limited to 1 – 3 minutes in length. You may also attach the video to our Visions of Hope Training Program Facebook Messenger.

Recommendation: Carefully proof your video and know that well-done concise videos are admired.

15. *Certification Statement:

By signing my name below, I confirm that all of the information provided above and in the accompanying documents is true and correct to the best of my knowledge.

Signed: _____ Date: _____