

Epilepsy Foundation of the Chesapeake Region
8503 LaSalle Road
Towson, Maryland. 21286
410-828-7700
800-492-2523
www.epilepsy-foundation.org

**IRA ROSENZWOG SCHOLARSHIP
APPLICATION FORM**
(please print neatly)

To be considered for the Ira Rosenzweg Scholarship you will need to complete the following application. In addition to the application, you will be required to submit financial documentation, a letter from your physician confirming a diagnosis of epilepsy, and official high school transcript, and an essay.
Deadline for application is April 6, 2012.

A. Applicant Information

Name of Applicant _____

Address of Applicant _____

Phone: (_____) _____

Social Security Number: _____

Mother's Name: _____

Father's Name: _____

Email: _____

B. Education Information

Complete if you are currently in high school:

Name of School: _____

Year of Graduation: _____

Complete if you have graduated from high school:

Name of School: _____

Year of Graduation: _____

Have you attended any colleges? no _____ yes _____

If yes, list school (s) attended:

SAT Score: _____

Type of school you are interested in attending:

_____ 2 year college

_____ 4 year college/university

_____ trade/technical school

C. Financial Information

Students income (2011) \$ _____

Parent(s) income (2011) \$ _____

Total Child Support (2011) \$ _____

Total: _____

Please attach a copy of most recent federal tax return (s)

Parent (s) projected income (2012) \$ _____

Expenses:

Medical/Dental Expenses (2011) \$ _____

(not paid for by insurance)

Tuition (2011)
(other dependent children) \$ _____
Total _____

Tuition projected (2012)
(other dependent children) _____

*Please attach a copy of your parent's most recent federal tax return regardless of your age.

Have you applied for any other financial assistance for school year 2012-13?

_____ no
_____ yes, please list: _____

Have you received any scholarships from other sources?

_____ no
_____ yes, please list: _____

Are you planning on working this summer (2012)?

_____ no
_____ yes projected income: \$ _____

D. ESSAY REQUIREMENTS:

All applicants are required to submit an essay. This essay should not exceed one typewritten page.

1. How has epilepsy affected your life?
2. What do you hope to gain from your college experience?
3. Why would you make a deserving recipient?

E. Additional information that may be relevant to your application.

F. Signatures Required

To the best of my knowledge, the above information is correct.

Signature of Applicant: _____

I give my permission to the Epilepsy Foundation of the Chesapeake Region to release my name to the press as a recipient of a grant from the Ira Rosenzweig Scholarship Fund. (I understand that my permission is not required in order to be considered for this scholarship.)

Signature of Applicant: _____

Document Checklist:

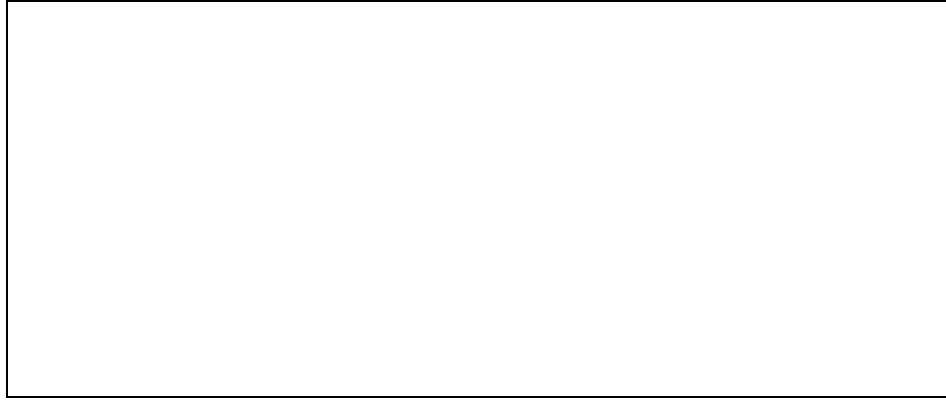
- _____ Application Form
- _____ Essay
- _____ High School Transcript
- _____ Federal Tax Return
- _____ Diagnosis Confirmation Letter (from attending physician)

Deadline for application is **April 6, 2012**

Submit application and all supporting documents to:

Epilepsy Foundation of the Chesapeake Region
8503 La Salle Road
Towson, Maryland 21286

ATTENTION: MARY WONTROP





Epilepsy Foundation of the Chesapeake Region
8503 LaSalle Road
Towson, Maryland 21286
410-828-7700/800-492-2523
www.epilepsy-foundation.org
Ira Rosenzweg Scholarship Fund

The Ira Rosenzweg Scholarship Fund was established in 1988 as a memorial to Ira Rosenzweg for his many years of volunteerism and financial contributions to the Epilepsy Foundation of the Chesapeake Region (EFCR). The scholarship fund was created to assist college students and others who have epilepsy to further their education. The Epilepsy Foundation of the Chesapeake Region is providing this opportunity with the hope that it will encourage people in Maryland with epilepsy to pursue a college education.

CRITERIA OF AWARD FUNDS:

- The applicant must have a diagnosis of epilepsy supported by documentation from their treating physician.
- Applicant must submit an application form along with an essay. The essay should address the following:
 1. How epilepsy has affected your life?
 2. What do you hope to gain from your college experience?
 3. Why would you make a deserving grant recipient?

- Applicant must be a resident of the agency's service area which includes: Baltimore, Harford, Carroll, Frederick, Washington, Allegany, Garrett, Anne Arundel, Howard, St. Mary's, Calvert, Charles, Prince George's and Montgomery Counties, as well as Baltimore City.
- There are no age restrictions on the application for this grant.
- Financial need must be documented and will be determined by the committee.
- Applications must be returned to EFCR by April 6, 2012.
- The grant is for tuition only. Funds will be paid directly to the institution.
- Acceptable colleges include 4- year undergraduate programs, community colleges, and vocational or technical institutions.
- If courses are dropped or not completed, monies will revert back to EFCR.
- A minimum grade point average of 3.0 must be maintained in each course in order to continue the tuition assistance.
- Student will be required to submit grades at the end of each semester.
- Re-application will be necessary if grade standards are not maintained.
- If recipient's grades do not meet stated criteria, a one year interim period will be required after which time recipient may re-apply.
- The recipient will submit a final report of the degree received.

FULL & PART TIME STUDENTS:

In each semester, full time undergraduate students must carry at least 12 hours of academic work and part time students must carry at least 6 hours of work. The limit for completion of a program will be a maximum of 4 years for full time and maximum of 8 years for part time.

INTERVIEWS: Candidates will be interviewed before a grant is awarded.