Scholarship Application Check List (All Steps Must Be Completed)

- ❑ Submit a completed Admissions Application to the University of Idaho.
- ❑ Provide a copy of the DD214 document as soon as one is issued.
- ❑ Provide **disability documentation**. Submit a copy of the Disability Rating Letter from the Veterans Administration, an official letter or other medical record documents from the attending licensed medical physician, and/or the enclosed form. The letter or medical documents must include a narrative interpretation summary, which confirms the date of injury, provides a description of the injury and/or resulting disability, and explains the disability's impact on one or more major life functions. **To be considered, applications must include appropriate disability documentation.**
- ❑ Applicants must submit the **Free Application for Federal Student Aid (FAFSA)** to the federal processor not later than August 1 for fall semester admits and December 1 for spring semester admits. It is strongly recommended that applicants file an electronic FAFSA application at: *www.fafsa.ed.gov*. For priority consideration for federal aid programs submit the FAFSA by February 15 prior to the academic year in which you will enroll.
- ❑ Applicants must apply for benefits from the Veterans Administration, including Vocational Rehabilitation.
- ❑ Complete the attached **Operation Education at the University of Idaho Scholarship Application** and submit to:
  Operation Education at the University of Idaho Committee
  Attn: University of Idaho Veteran Adviser
  Office of the Dean of Students
  University of Idaho
  Moscow, ID 83844-3179

Due Dates for Application Materials

- ❑ Applicants who are admitted to Idaho for the fall term should return the completed forms and documentation no later than August 1. Applicants for spring term should submit all material no later than December 1. **Applications received after these dates may be considered contingent upon available funds.** Students who meet the University of Idaho's financial aid priority date of February 15 receive first consideration for other financial aid programs offered by the university.

***NOTE:** Once funded, recipients will automatically receive scholarship funds for subsequent years, provided they are enrolled as active students and are maintaining satisfactory academic progress towards their degree. The level of funding may change from year to year depending on the needs of the recipient, other resources, and the funding available from this program.

Questions?

Contact the Idaho Veteran Adviser by phone, e-mail, fax or in person:

Veteran Adviser:	John Sawyer
Phone:	208-885-7979
E-mail:	johns@uidaho.edu
Fax:	208-885-9494
Location:	Office of the Dean of Students Teaching Learning Center – Room #232H University of Idaho Moscow Campus

These materials are available in Braille, large print, and on computer disk with 10 working days' notice.
Contact Disability Support Services at 208-885-6307.

OPERATION EDUCATION

UNIVERSITY OF IDAHO

Scholarship Application

Note: Applicants who complete this application must apply and be accepted for enrollment at the University of Idaho for either the fall or spring semester of the school year in a degree program. The academic year begins with the **Fall Semester** (August – December) and ends with the **Spring Semester** (January – May).

Name: _____
Last Name First Name Middle Name

SS#: _____ UI Student ID# (if known): _____

Current Address: _____
Street Address/PO Box City State Zip

Current Phone: (____)_____ E-Mail: _____

Preferred Point of Contact _____
Address information

Phone: (_____) _____

Applicant's status: ❑ Veteran ❑ Spouse of a Veteran

❑ Check here if both the Veteran and his or her Spouse are applying (note that separate applications must be submitted)

I would like to be considered for Operation Education Scholarship funding for the following semesters:

❑ Fall (August – December) ❑ Spring (January – May)

I will be:
- ❑ an Undergraduate Student (pursuing my first bachelor's degree)
- ❑ an Undergraduate Student (pursuing a second degree)
- ❑ a Graduate Student
- ❑ a Law Student

My Degree/Career Objective:

_____

_____

_____

_____

DISABILITY INFORMATION

1. ***Check all that apply: (Attach additional sheets if necessary).***

- ❑ Blind
- ❑ Visual Impairment
- ❑ Deaf
- ❑ Hard of Hearing
- ❑ Chronic Health Condition
  Please describe _____
- ❑ Mobility/Orthopedic (non-wheelchair)
- ❑ Mobility/Orthopedic—wheelchair user
- ❑ Traumatic Brain Injury (TBI)
- ❑ Other: _____

2. Date of injury, location, and military operation, if applicable: _____
(Example: Oct 04, Baghdad, OIF II)

3. Briefly describe your injury and the resulting disability and the circumstances in which it was sustained.

4. What limitations are imposed by your disability?

5. What are the injury-related adjustments or accommodations you currently use?

6. Identify the disability-related academic adjustments or accommodations you anticipate needing while at the University of Idaho:

Check all that apply:

- ❑ Housing accommodations
- ❑ Child care Specialized medical care
- ❑ Personal care
- ❑ Campus/classroom access
- ❑ Preferential seating in classroom
- ❑ Electronic devices in classroom (i.e.: Braillenote, laptop; FM System)
- ❑ Specialized furniture in the classroom
- ❑ Academic adjustments (testing accommodations, computer access, note-taker/scribe, hearing device, language/oral interpreter/captioner, etc.)
- ❑ Emergency evacuation assistance
- ❑ Parking
- ❑ On-campus transportation
- ❑ Off-campus transportation
- ❑ Snow removal
- ❑ Other adaptive eqipment or accommodative services:_____
  _____

PERSONAL INFORMATION

If married, please provide the name of your spouse and number of years married.

Will you have dependents living with you? If yes, please list their ages and sex.

Do you have a personal care attendant? If yes, briefly describe the arrangement.

Other information which might assist the selection committee:

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Certification of complete and accurate information:

- ❑ I have submitted to the University of Idaho a complete Application for Admission.
- ❑ I have submitted a complete Free Application for Federal Student Aid (FAFSA) Form to the U.S. Department of Education Federal Processor.
- ❑ I have applied or will apply for assistance from the Veterans Administration, including vocational rehabilitation.
- ❑ I am submitting a complete and accurate Scholarship Application Form and the required supporting documentation.

I hereby certify that I have completed the above application requirements for consideration for this scholarship from the University of Idaho's Operation Education Program.

_____ _____
(Applicant's Signature) (Date)