

The Founders Scholarship

The Founders Scholarship is intended to support the educational goals of individuals with additional needs, or their caretakers, and is open to residents of Cochise County who have a disability, or are caretakers of an individual with a disability.

Full Name (First, Middle, Last)	
Email Address	
Phone Number	
Home Address (Street, City, State, ZIP)	
Mailing Address (if different from Home Address)	
Do you have a diagnosed disability or are you a someone with a disability?	full- or part-time caretaker of
Have you previously applied for a Founders Scho	olarship?
Yes, I have previously applied and did receive	funds (Received: \$)
Yes, I have previously applied and I did not red	ceive funds
No, I have not previously applied	
Please list the college, trade school, or certificate attending or will be attending. (Federal regulations require that scholarships made througinstitutions)	



Will you be a full-time or part-time student at the start of the Fall Semester? (Full-time status as determined by your college or technical/certificate program.)
Full-time Part-time
What is/are your intended educational goal(s)? (Additional consideration may be given to those pursuing careers that will directly support the lives of people with additional needs)
What is the estimated graduation or completion date for your program? (Month and year)
How did you hear about the Founders Scholarship?
Do any of your relatives work for Premier Alliances, Inc. or serve on its Board of Directors?
Yes No
ESSAY QUESTIONS Please answer all three of the following essay questions. Answers must be at least 250 words and no more than 500 words. Note that the essay questions make up the bulk of an application's score.
Optional Letter(s) of Support You may attach to this application up to two letters of support from someone

other than a family member. These letters must not be longer than one page, single spaced, and should touch on the topics outlined in the essay questions.



Provide an explanation of your financial need. Please use this essay question to detail any other financial aid you have received, including scholarships, grants, and loans.



How has your disability (or your work as a caretaker of someone with a disability) impacted or shaped your life?



If you have a disability yourself, how would achieving your educational goals impact your life? Or, if you are a caretaker of someone with a disability, how would achieving your educational goals impact the life of an individual with a disability?