



2026 Premier Alliances Inc. Founders Scholarship

(READ THOROUGHLY BEFORE STARTING YOUR APPLICATION)

Premier Alliances, Inc. began in 1962 as The Little Red Schoolhouse, where community members came together to provide educational opportunities for children who had developmental disabilities. Over time, Premier Alliances evolved into the most significant employer of individuals with additional needs in Cochise County. The Founders Scholarship honors the organization's beginnings by returning to its educational roots. This program recognizes and supports the efforts of individuals with disabilities to achieve their educational goals and reflects the mission of Premier Alliances: *Improving the Lives of People with Disabilities*.

Who Can Apply

Applicants must be Cochise County residents who have a disability or are caretakers of an individual with a disability. Eligible applicants must be pursuing education or training through an accredited college, trade school, or certificate program. All scholarship funds are disbursed directly to the educational institution and cannot be given directly to the scholarship recipient.

What To Submit

1. Completed application form

The essay questions are the primary factor in scholarship scoring. Your responses will make up the bulk of the review, so take your time to answer thoughtfully and clearly to help us understand your goals, challenges, and achievements.

2. **Optional:** If writing is challenging for you, you can include up to two letters of support from a non-family member such as:
 - Teachers
 - Mentors
 - Counselors
 - Employers

Optional letters of support can be helpful for applicants who experience difficulty with writing, as they offer another way to share important information. Each letter should address the same topics outlined in the essay questions. These letters should be no longer than one single-spaced page each.

All applications must be submitted to info@premieralliances.org.



The Founders Scholarship

Please answer the following questions to the best of your ability.
The Founders Scholarship 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 full- or part-time caretaker of someone with a disability?

Yes No

Have you previously applied for a Founders Scholarship?

- Yes, I have previously applied and did receive funds (Received: \$_____)
- Yes, I have previously applied and I did not receive funds
- No, I have not previously applied

Please list the college, trade school, or certificate program you are currently attending or will be attending.

(Federal regulations require that scholarships made through charitable funds go to accredited institutions)



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 degree or certification do you hope to attain?

What is your intended career choice?

(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.

If you have any questions, email us at info@premieralliances.org



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?