**School-to-Work Scholarship**

**Illinois Council for Exceptional Children (ICEC)**

Eligibility & Application Requirements

1. The applicant must be a high school **Illinois resident** with a disability who plans to transition into a career setting.
2. The applicant must submit the following documents in their application:
   1. An application (attached below)
   2. A video that explains (a) why they are applying for the scholarship, (b) their special education journey how they have overcome obstacles to get where they are today and/or compensated based on their disability.
   3. One letter of recommendation from his/her special education teacher or case manager describing the student’s goals for transition into a post-secondary setting.
   4. One letter of recommendation from his/her current or future employer or supervisor of volunteer or community service activity.
   5. A copy of their official high school transcript (please make sure not to display the student’s SS#).
   6. Evidence of high school enrollment in a special education program.
3. Please do not include your social security number or any other personal ID numbers in your materials.
4. Deadline for the application is Saturday, May 15, 2021.

**ILLINOIS COUNCIL FOR EXCEPTIONAL CHILDREN**

School-to-Work Scholarship Application

Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Last

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

street city state zip

Home Phone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education**

Name of High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

street city state zip

Date of Graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section I.** In this section, you will describe extra-curricular, employment, and community service activities that you have participated in.

**Extra-curricular Activities**

|  |  |  |
| --- | --- | --- |
| Extra-Curricular Activities | Date of Participation | Description of How the Participant Was Involved in Activity |
|  |  |  |
|  |  |  |
|  |  |  |

**Employment/Community Services Experience**

|  |  |  |
| --- | --- | --- |
| Employer/Organization | Dates of Employment | Job Title Responsibilities |
|  |  |  |
|  |  |  |
|  |  |  |

**Section II.** Provide a description of your accomplishments and how you plan to use the scholarship funds in your future career setting.

**Accomplishments**

|  |  |
| --- | --- |
| Academic, Transition, and/or Social Emotional Learning | Description of Accomplishment |
|  |  |
|  |  |
|  |  |

**Budget**

|  |  |  |
| --- | --- | --- |
| Activity | Amount of Funds | Describe How Scholarship Funds Will Be Used |
|  |  |  |
|  |  |  |
|  |  |  |

If you have questions, please contact Lisa Liberty at 714.746.7500

or [illinoiscecscholarship@gmail.com](mailto:illinoiscecscholarship@gmail.com)

and

Please send the completed application to [illinoiscecscholarship@gmail.com](mailto:lliberty@niu.edu).