

2018 College Scholarship Application Guidelines

Autism Alliance of Northeastern NY will award a limited number scholarships of \$1000 for full-time and \$500 for part-time students.

- Applicants must meet the following criteria:
 - O Currently enrolled or in the process of enrolling at a college or university.
 - Both online and on-campus programs are acceptable
 - O Have a diagnosis of an autism spectrum disorder (medical or educational).
 - O Have a high school diploma, the equivalent to a high school diploma (i.e. GED or IEP diploma, etc.), or will obtain a high school diploma or equivalent prior to college start date.
 - Demonstrate financial need.
 - O The permanent address of the applicant must be within Clinton, Franklin, and Essex counties for at least one year. Students who have a permanent address within these counties, but who are attending school elsewhere are still eligible for the scholarships.
- Scholarships monies must be used toward college related expenses. Monies will be made available through direct payment to the college.
 - O College related expenses may include, but are not limited to:
 - Tuition & College Fees
 - Room & Board
 - Books
 - Technology (i.e. laptop, software, hardware, etc.)
 - Academic supports and supplies
- Scholarships are not to be used for costs of daily living (i.e. groceries, gas, clothing, etc.) or other non-academic materials.
- All requests will be reviewed by the Grant Committee and approved by the Board of Directors.
- Autism Alliance of Northeastern NY is not bound to approve funds for all scholarship applicants. It also reserves the right to deny a scholarship application.

Send completed application to:
Autism Alliance of Northeastern NY
Attn: Grants
P.O. Box 1884
Plattsburgh, NY 12901

Please e-mail the grant committee with any questions at grants@aaneny.org.



2018 College Scholarship Application

Applicant's Name:							
Phone Number:							
Email:							
Street Address:							
City, State, Zip:							
High School / Date of Graduation:							
College / Major / Start Date:							
Type of enrollment:	Full Time	/	Part Time	/	Waitlist	/	Undecided
 A. What does the college experies B. What are your strengths and of C. What does Autism mean to you D. What do you hope to learn in E. What part of the college experies 	challenges (botou?	h aca acade	emically and	socia	lly)?	?	
F. What is your intended Major G. What are your career goals a	and why did yo	ou cho	oose it?				ose goals?
H. In what community service groups or organizations have you been actively involved?							

I. In what extracurricular activities have you been involved?



Please include a copy of the following documentation with your application:

- Diagnosis of an autism spectrum disorder
- Residency
- High school diploma or equivalent (*Please send upon receiving*)
- Acceptance letter from the college/university you plan to attend (*Please send upon receiving*)
- Typed or handwritten essay
- Completed FASFA Application
- Letter of Recommendation **at least 1** (Academic letters are preferred, but personal letters will be accepted)

Applicant Signature:	Date:
Parent/Guardian Signature: (If under 18)	Date: