

Dear Student:

Thank you for your interest in the Ballou Scholarship. Attached you will find the necessary application materials.

A donor has created the Ballou Scholarship to provide a scholarship to a full-time, degree seeking undergraduate NIU student who is in good academic standing. The student may be pursuing any academic discipline. Preference will be given to students with a diagnosed mental, physical, or learning disability. Each year, one recipient will receive \$5,000.00 to be applied towards educational expenses. The scholarship will be available for 5 years beginning in fall 2008 and ending in fall 2010.

The following must be submitted in order for you to be considered for the award:

1. Application
2. Submission of a personal statement in which you may: outline your educational and career goals, describe your need for this scholarship, and highlight some extra and/or co-curricular activities and/or community activities in which you are involved.
3. A current degree audit report.
4. Applicants must also provide documentation of their disabilities. If a student is registered with the NIU Center for Access-Ability Resources (CAAR), he/she must sign the attached information release form; the CAAR office will then be contacted for verification. If a student has chosen not to register with CAAR or partake in CAAR's services in the past, she/he should obtain current written medical and/or psychoeducational documentation and send it to CAAR with the attached cover sheet. This information will be maintained confidentially and used exclusively for the Ballou Scholarship process. Submitting documentation to CAAR for this scholarship in no way registers a student with CAAR or obligates the student to partake in CAAR's services.

Students should compile all necessary components and submit them at one time.

Application materials are due by **1 November 2008** to be considered for the award paid for the spring 09 semester. This deadline date will be strictly enforced. A recipient will be announced during the Fall 2008 semester. The scholarship will be credited to the student's Northern Illinois University Bursar's Account for spring 2009.

Application materials must be **delivered, postmarked, or date stamped by fax transmission by 1 November 2008** and sent to:

Ballou Scholarship Coordinator  
College of Health and Human Sciences  
227 Wirtz Hall  
Northern Illinois University  
DeKalb, IL 60115  
Fax: 815-753-6169

## **Ballou Scholarship Guidelines Northern Illinois University**

The Ballou Scholarship is made possible by a donation from the Ballou family. Northern Illinois University will offer an annual \$5000.00 scholarship to assist a student with educational expenses. This merit- and need-based scholarship will be awarded to full-time undergraduate students in any academic discipline. Preference will be given to students with a diagnosed mental, physical, or learning disability.

### **ELIGIBILITY**

Applicants must:

- Be full-time students in any academic discipline
- Be in good academic standing with a GPA of 2.0 or above
- Submit documentation of a diagnosed mental, physical, or learning disability using the attached form.

### **APPLICATIONS**

The first award will be made in spring 2009 and will be paid beginning that semester. Applications are due on **1 November 2008**.

Application form is attached or available online at [www.niu.edu/scholarships/](http://www.niu.edu/scholarships/)

### **SELECTION PROCESS**

Selections will be made by the College of Health and Human Sciences Committee on Grants and Awards. The committee includes a representative from each school in the college.

Students will complete an application form and write a brief essay as part of the selection process.

Northern Illinois University is an Equal Opportunity/Affirmative Action Institution. This scholarship shall be awarded without regard to race, color, ethnicity, religion, age, marital status, sex, national origin, disability, veteran status, or any other factor unrelated to the scholarship criteria.

Applicants must complete the following Verification Form and submit it to CAAR in order to be considered for the scholarship. Failure to submit the form will be considered an incomplete application and will not be eligible for review.

(Please detach the lower portion and return to the CAAR office)

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**The Ballou Scholarship**

**Attention Nancy Kasinski:**

I \_\_\_\_\_  
(PLEASE PRINT NAME)

have applied for the Ballou Scholarship.

Please check one:

- I am not registered with CAAR. As such, I have attached current medical and/or psychoeducational documentation to be used for consideration for the Ballou Scholarship. I understand that the submission of this documentation does **not** register me with CAAR, nor does it obligate me to partake in any of CAAR's services.
- I am registered with CAAR. I grant CAAR permission to release information for consideration of the Ballou Scholarship selection committee.

I understand that the submission of this information pertains to the scholarship process only and will be maintained confidentially.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Return this form and any necessary medical and/or psychoeducational documentation by 1 November 2008, to:**

**Center for Access-Ability Resources (CAAR)  
University Health Service, 4<sup>th</sup> Floor  
Northern Illinois University  
DeKalb, IL 60115**

**Phone and TDD: 815-753-1303**

**Northern Illinois University**  
**Ballou Scholarship - Spring 2009 Application**

Applicants must:

- Be a currently enrolled full-time undergraduate student pursuing a degree in any academic discipline.
- The student must be in good academic standing.
- Submit a current DARS report and personal statement.
- Document a diagnosed mental, physical, or learning disability using attached form.

**Name:** \_\_\_\_\_  
(Last) (First) (Middle Initial) (ZID)

**Local Address:** \_\_\_\_\_  
(Street) (City, State, Zip Code) (Telephone #)

**Permanent Address:** \_\_\_\_\_  
(Street) (City, State, Zip Code) (Telephone #)

**Email Address** \_\_\_\_\_ **Current NIU GPA** \_\_\_\_\_

**Major & Date Declared :** \_\_\_\_\_

**Intended Graduation Date:** \_\_\_\_\_ **Total Credit Hours Earned:** \_\_\_\_\_

**Academic and Community Extracurricular Activities:** (List activities/organizations in which you have participated and identify leadership positions.) \_\_\_\_\_

**Honors Received:** \_\_\_\_\_

**List sources of funding for your college expenses:** \_\_\_\_\_

Please submit a one-page statement in which you summarize your qualifications for this award, outline your educational and career goals, and describe why you think you deserve to receive this scholarship, or highlight your need for this scholarship. The essay must be typed and include the applicant's name.

By filling out this application, signing it and returning it, you give permission to share your name with the donor. You also agree to write a thank you note to the donor.

I hereby certify that the information provided in this application packet is to the best of my knowledge, true, and correct. I have not knowingly withheld any facts that could otherwise jeopardize consideration of the application. I understand that my academic, judicial, financial, and any other pertinent records will be verified by the appropriate school and university offices. I further understand that my medical/psychoeducational documentation will be verified. Additionally, I grant permission to the Ballou Scholarship Award Committee to contact the NIU Office of Student Financial Aid to learn whether or not I have applied for and/or will be receiving financial aid for the 2008-2009 academic year.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Submit to: **Ballou Scholarship Coordinator**  
**College of Health and Human Sciences**  
**Northern Illinois University**  
**227 Wirtz Hall**  
**DeKalb, Illinois 60115**

Application, one-page statement, disability verification and degree audit report must be received by 1 November 2008.  
All required materials should be submitted together in a single packet to be eligible for the scholarship.