

Access Scholarship Application

North Dakota Center for Persons with Disabilities

Minot State University



Purpose

The purpose of the Access Scholarship is to support students with significant disabilities attending Minot State University. To be eligible for the Access Scholarship, applicants must be enrolled for a minimum of six (6) semester hours and have a significant sensory or mobility disability.

The Access Scholarship is awarded by the North Dakota Center for Persons with Disabilities Consumer Advisory Council. Awards are made periodically based on the availability of funds and eligible applicants. If chosen for this award, you allow NDCPD the right to use your name and photograph in electronic media and publications. **The application deadline is June 1.** Application materials are available in alternative formats upon request and online at <http://www.ndcpd.org/disinfo/access.shtml>. Please direct questions to NDCPD's Executive Director at (701) 858-3580.

Personal Information (complete each item)

Name	
Mailing Address	
City, State, Zip	
Home Phone	
MSU Student ID #	

Applicant Information related to Disability and Education

Disability (Check all that apply) <input type="checkbox"/> Vision <input type="checkbox"/> Hearing <input type="checkbox"/> Speech/Language <input type="checkbox"/> Movement <input type="checkbox"/> Mobility <input type="checkbox"/> Health <input type="checkbox"/> Learning		Education – this fall, my college status will be a: <input type="checkbox"/> College Freshman <input type="checkbox"/> College Sophomore <input type="checkbox"/> College Junior <input type="checkbox"/> College Senior <input type="checkbox"/> Graduate Student <input type="checkbox"/> # of credits I will take in the fall semester	
Year graduated from High School: _____			
Intended major course of study: _____ or ___ undecided			
Name, title, or diagnosis of disability: 			

Application Questions

As a student with a disability, indicate which (if any) of the following accommodations that you have requested:

EQUAL ACCESS Accommodations

- | | | |
|--|---|--|
| <input type="checkbox"/> Priority registration | <input type="checkbox"/> Accessible classroom | <input type="checkbox"/> Note takers |
| <input type="checkbox"/> Assistive technology | <input type="checkbox"/> Text on CDs | <input type="checkbox"/> Interpreters and captioning |

TESTING Accommodations

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Oral testing | <input type="checkbox"/> Scribe services | <input type="checkbox"/> Extended time testing |
| <input type="checkbox"/> Reader | <input type="checkbox"/> Private/quiet room | |

As a student with a disability, indicate which (if any) of the following accommodations that you use personally to reach the campus or support yourself while going to school.

- | | | |
|---|--|--|
| <input type="checkbox"/> Service dog | <input type="checkbox"/> Accessible transportation | <input type="checkbox"/> Modified living space |
| <input type="checkbox"/> Orientation and mobility aides | <input type="checkbox"/> Adaptive materials | <input type="checkbox"/> Personal living assistant |
| <input type="checkbox"/> Other, please specify _____ | | |

Have you applied for or received other scholarships this year? Yes or No

If yes, please list:

Why are you going to college? What challenges do you anticipate? How will this scholarship be helpful? (please attached additional sheets as necessary)

List any extra curricular or volunteer activities that you have done in the past year.

Address Information

Please return this application by **June 1st** to: NDCPD Access Scholarship
Attn: Executive Director
Minot State University
500 University Ave. West
Minot ND 58707

For Office Personnel Use Only:

- Confirmed with MSU Enrollment Services applicant is enrolled in Fall Semester. If not registered, check here_____
- Confirmed with MSU Disability Services applicant has a significant disability