



Mayor's Committee for Persons with Disabilities
NOMINATION FOR THE STEPHEN L. KNIER MEMORIAL SCHOLARSHIP
FOR OUTSTANDING STUDENTS WITH DISABILITIES

Nominee's Name: _____

Home Address: _____

Home Phone: _____

Current School: _____

School Address: _____

School phone: _____

Overall GPA: _____ *(Please attach transcript.)*

Financial Need per Current FAFSA: _____ *(Please attach copy of Student Aid Report.)*

Honors and Activities: *(Please attach additional pages if needed.)*

Education and/or Vocational Training:

What difficulties has student encountered in surmounting his/her disability? Explain student's initiative, resourcefulness, and perseverance in overcoming the disability.

Explain how student has exhibited ingenuity in adapting to his/her school or living environment.

Submitted by: _____
Address: _____
Phone: _____
Date: ____/____/____

Please attach two letters of recommendation.

Return to: Donna Gray
Mayor's Committee for Persons with Disabilities
Post Office Box 3136
Greensboro, NC 27402
Phone: 336-373-2723
Fax: 336-373-4656

Deadline: April 30, 2017