

2010 Hamilton Relay Scholarship: Guidelines

Preface

The goal of the Hamilton Relay Scholarship is to support individuals who are deaf, hard of hearing or speech disabled in their post-secondary education. One \$500 Scholarship will be awarded to a qualifying high school student living within each of the States where Hamilton Relay is the contracted telecommunications relay service provider.

Eligibility Criteria

1. Applicant must be a person who is deaf, hard of hearing or speech disabled.
2. Applicant must be a resident of one of the following states: AZ, CA, DC, GA, ID, IA, KS, KY, LA, ME, MD, MA, MT, NM, PA, RI, UT or WY
3. Applicant must complete and submit application, essay and letter of recommendation to be eligible.
4. Scholarship will be awarded to chosen applicant per state after Hamilton State Scholarship Committee reviews all applications submitted on or before posted deadline.

Guidelines for Hamilton Relay Scholarship

1. Application packet must be completed and postmarked by March 31, 2010, to include the following:
 - a. Scholarship Application
 - b. Letter of Recommendation from staff at high school or place of employment
 - c. One page essay as required (topic assigned on application)
2. Mail the application and attachments to:

Hamilton Relay Scholarship Committee

Hamilton Relay, 1001 12th Street, Aurora, NE 68818

Note: applications and attachments may be scanned and emailed to scholarship@hamiltonrelay.com by midnight March 31, 2010. Original application and attachments must still be mailed to the scholarship office within 10 days following this date for our files.

3. Scholarship award announcements to be made on or before April 30, 2010.
4. Scholarship award recipients must complete and return a "Scholarship Recipient's Agreement Form", along with a Letter of Acceptance to the post secondary school they will attend, allowing Hamilton to process payment directly to the school.



2010 Hamilton Relay Scholarship: Application

School Year 2009-2010

(You may print or type responses on this form, or reproduce form on computer.)

- **Awarded to graduating high school senior who is Deaf, Hard of Hearing or Speech Disabled.**
- **Please clip all attachments together with application. Do not staple. Do not include binders or report covers with your submission.**
- **If a question is not applicable to you, please write "NA" (do not leave a question blank).**
- **Deadline is March 31, 2010 (application must be postmarked by this date).**

Applicant Information:

Name (First, Middle, Last): _____

Date of Birth (MM/DD/YY): _____ **Gender: M** ___ **F** ___

Address: _____

Student E-mail: _____

Home Telephone (V/TTY/Internet Relay/Video Relay): _____

Parent's/Guardian's Names:

Parent's/Guardian's Contact Information:



High School Attended / Graduation Date:

High School Counselor's Name: _____

High School Telephone Number: _____

High School Address: _____

College/University/Trade School Name and Address:

How did you hear about the Hamilton Relay Scholarship?

The \$500 scholarship is intended for a graduating senior who is Deaf, Hard of Hearing or Speech Disabled. Please indicate your position.

Deaf _____ **Hard of Hearing** _____ **Speech Disabled** _____

Essay (Limit one page): Please write a short essay answering the question below:

What communication technology/capability would you like to have that is not available to you today (i.e., not yet in existence)?

List clubs, sports, organizations, community service and activities that you have been involved in during your high school years:

Work Experience:

Please list the schools you have applied to/been accepted for admission:



Please read before submitting your scholarship application: By submitting this application, I certify that the information contained therein is correct to the best of my ability and understand that false information or omission of data may result in denial of my application. I will provide all materials to the Hamilton Relay scholarship committee to be postmarked by March 31, 2010. If chosen for the Hamilton Relay \$500 Scholarship award, I agree to complete the Scholarship Recipient's Agreement Form and return it to Hamilton Relay. I understand that if I do not comply with this requirement, my scholarship funds will be awarded to the selected alternate.

Signed: _____ **Date:** _____

_____ I have included a letter of recommendation from staff at my High School or place of Employment.

_____ I have included the Application Form with one page Essay.

Please return the required materials by mail on or before March 31, 2010 (application must be postmarked by this date) to:

**Hamilton Relay Scholarship Committee
Hamilton Relay
1001 12th Street
Aurora, NE 68818**

Application may also be submitted by email to: scholarship@hamiltonrelay.com. E-mail applications must be received by Midnight of the Time Zone in the state in which you reside. Important: If submitting via email, you must still mail the hard copy originals of your application to the Hamilton Relay scholarship office for our files within 10 days.