



Disability Scholarship Application

PURPOSE

The mission of this scholarship is to provide financial assistance to disabled individuals who are enrolled and study in community colleges, colleges and universities. The Association of Iranian American Professionals principally targets all the academic programs and consideration is given to students at graduate and undergraduate levels. Financial assistance is based on academic performance, disability condition, leadership potential, and participation in the programs. Scholarships are awarded annually provided funds are available.

QUALIFICATIONS

- This scholarship is available to Iranian Students studying in the United States who are physically disabled. Students with learning disability, ADHD and emotional disability cannot be qualified for this scholarship.
- Applicants must be accepted and enrolled as a full time student at a college or university for the upcoming academic semester in the United States. If scholarship money is awarded, this is the only program that will receive the funds on behalf of the applicant.
- The disabled student must meet the minimum academic requirements set by the committee. A minimum GPA of 2.5 on a 4.0 scale is required.
- Applicants must be a citizen of Iran legally studying United States.
- Applicants must complete and submit a Scholarship Application electronically.

TIMELINE

- There is **no deadline** for application submission.
- Candidates may be asked for an interview by the Scholarship Committee conducted by AIAP.
- Applicants will be notified if awarded a scholarship.

SCHOLARSHIP APPLICANTS MUST PROVIDE:

- Completed application form.
- Disability documentation.
- Verification of enrollment.
- Official proof of academic standing.
- A copy of Student ID

SUBMISSION Please send a copy of the application for to admin@aiap.org.

Application Form (be filled out by applicant)

Please type on a separate sheet or print your answers below.					
1	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Last Name:</td> <td style="width: 50%;">First Name:</td> </tr> </table>	Last Name:	First Name:		
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9	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Disability Description:</td> <td style="width: 50%;"></td> </tr> </table>	Disability Description:			
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STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me to the association of Iranian American Professionals is true, correct and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the Disability Scholarship Program.

I hereby understand that if chosen as a scholarship winner, according to scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____ Date: _____