**ILLINOIS TRIO
2023 Scholarship Application**(This form is to be completed by the student.)

**Student Information**

**Name** (First & Last): Click or tap here to enter text.

**Address** (*Please list the address where you would like to receive your scholarship check if you are selected as a winner*):
Street: Click or tap here to enter text.
City: Click or tap here to enter text. State: Click or tap here to enter text. ZIP: Click or tap here to enter text.

**Cell Phone:** Click or tap here to enter text. **Personal Email** (not school):Click or tap here to enter text.

**TRIO Program Affiliation**

**College/University/Community Organization Name:** Click or tap here to enter text. **Program:** Choose an item.

**Director Name:** Click or tap here to enter text. **Director Email:** Click or tap here to enter text.

**Illinois TRIO Scholarships** (check all that student wishes to apply for)

 ***College/Adult Category:*** ***Pre-College Category:***

**Academic Information** (at the time of application)

[ ] Board of Directors’ Scholarship ($500)
[ ]  Board of Directors’ Textbook Scholarship ($250)
[ ]  Past Presidents’ Council Leadership Award ($500)

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 **Current Institution** (high school or college/university): Click or tap here to enter text.

 **Anticipated Graduation Date:** Click or tap to enter a date. **Major:** Click or tap here to enter text.

 **Anticipated Career:** Click or tap here to enter text. **Cumulative GPA\*:** Click or tap here to enter text. \*All scholarships require a minimum cumulative **GPA of 2.5/4.0.**

**Essay & Supporting Information**

[ ]  I have attached an essay (*typed, double-spaced, not exceeding 2 pages*) to my application which describes:

* Examples of my co-curricular and/or community involvement
* How TRIO has impacted your educational experience *AND* how it has shaped you as a leader
* How the Illinois TRIO scholarship(s) could impact you if you are selected as a recipient

[ ]  I have attached my unofficial transcripts for my current high school, college, or university.

[ ]  I have confirmed with the Director of my TRIO program that a TRIO staff person will complete a nomination form and forward all application materials to illinois-scholarship@eoa.org on my behalf.

**Verification & Submission Statement**

 *I affirm the information provided by me and contained within this scholarship application is correct and accurate. I understand that any misrepresentation in this submission will disqualify me from consideration as an Illinois TRIO scholarship candidate. My signature below certifies my voluntary submission of this application.*

Click or tap here to enter text. Click or tap to enter a date.
**Applicant Signature** **Date**

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**ILLINOIS TRIO
2023 PHOTO RELEASE FORM**

If chosen as a scholarship recipient, I \_\_\_\_\_\_\_\_\_\_\_ authorize that the provided photograph may be used in publications and/or materials of the Illinois TRIO Association.

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Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature

**Note:** If student is under 18 years of age, please provide parental signature below.

 Parental Signature

**Student must provide a jpeg photo of themselves to the nominator with this form, at the time of the submission of their scholarship application so that information can be added to Illinois TRIO Association publications and/or materials, if student is chosen for scholarship.**