



Believe It  
FOUNDATION

## Scholarship Application for the Physically Challenged

### Student Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: Month/Day/Year \_\_\_\_\_

Mailing Address (Street, City, State, Zip) \_\_\_\_\_

\_\_\_\_\_

Area Code/ Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Gender (*circle one*): Male                  Female

Type of physical challenge: \_\_\_\_\_

Are you currently a (*circle one*): High School senior          College student

If currently enrolled in college, what school: \_\_\_\_\_

If a high school senior, to which schools have you applied?

NAME OF SCHOOL

ACCEPTED? (*circle one*)

\_\_\_\_\_ Yes          Have not heard yet

\_\_\_\_\_ Yes          Have not heard yet

\_\_\_\_\_ Yes          Have not heard yet

\_\_\_\_\_ Yes          Have not heard yet

Areas of Academic interest: \_\_\_\_\_

Circle the first semester for which you are applying for the scholarship:

Summer 202\_\_                  Fall 202\_\_                  Spring 202\_\_

Community Service activities; \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Honors or achievements earned: \_\_\_\_\_

**Parents:**

Father/Guardian Full Name: \_\_\_\_\_

Mother/Guardian Full Name; \_\_\_\_\_

**Student's Personal Statements:**

- 1) Please submit a one page, typed essay outlining how you became physically challenged, how your situation has affected you and your family and your goals and aspirations for the future.
- 2) Please submit a one page, typed essay describing the influence of an outstanding teacher.

**Other Required Attachments:**

With this application, please also include the following:

1. Two letters of recommendation, at least one being from a high school teacher.
2. Physician's documentation of your physical challenge.
3. High school transcripts, including SAT or ACT scores and college transcripts if applying as a current college student.
4. A good recent, full body photo.
5. Proof of need (FAFSA Form).
6. List of scholarships that you have already obtained.

**Applications are due by April 1.** Your application will be reviewed and if anything is missing, we will contact you via email. No emailed or faxed applications will be accepted. Mail completed applications with all attachments to:

**Believe It Foundation  
4242 Broadway, #706  
San Antonio, TX 78209**

For further information, please contact Andrew McAllister ([Andrew@believeitfoundation.org](mailto:Andrew@believeitfoundation.org)) or William McGinnis ([William@believeitfoundation.org](mailto:William@believeitfoundation.org)).