

Lady Gray Legacy Scholarship Application

Scholarship Amount: 3-credit course (tuition only!)

Name: _____ Student #: _____

Address: _____ Phone #: _____

City: _____ State: _____ ZIP: _____

Phone # (Home): _____ Phone # (Cell): _____

E-Mail: _____ Major: _____

Current Enrollment Status: _____ Total Credits Completed: _____

Scholarship Criteria:

- The scholarship is open to all BCCC students who have a mobility disability and, at the time of application, receive services from BCCC's Accessibility Office.
- Applicants **must** have distinguished themselves by proving their motivation for self improvement and/or personal growth.
- Applicants **must** be enrolled at least part time (minimum of 3 credits), and intend to return to BCCC in the following academic year after the award is made and enroll in a minimum of 3 credits.
- **Must** provide the following:
 - Identify your mobility-related disability and any assistive devices used for mobility.
 - Describe your efforts to improve yourself (you may choose another person to respond to this statement via a letter of support, or submit a one-page essay yourself).
- There is no minimum grade point average required to apply.

I meet all of the scholarship criteria and have enclosed the required information with my application.

Name: _____ Date: _____

Signature: _____

Please return your completed application to:

Bucks County Community College
c/o The Accessibility Office
275 Swamp Road
Newtown, PA 18940

APPLICATION DEADLINE: April 1