

ACADEMY OF SPECIAL DREAMS FOUNDATION COLLEGE SCHOLARSHIP FUND

\$250-\$500-\$1000 Scholarships

CRITERIA

1. Applicant must be a person with a disability and lawful resident of the United States. A written statement of the Applicant's treating physician or other medical provider describing the Applicant's disability must be furnished.
2. Applicant shall have applied to and/or have been accepted or currently enrolled in a college or university, trade school, art school or other recognized degree-awarding program with an expressed desire to study or major in any field of Art. Enrollment in a college or university, trade school, art school or other recognized degree-awarding program must be documented before the scholarship is awarded.
3. Applicant shall submit a portfolio of no fewer than 5 unique works of Art which will be featured on the Academy of Special Dreams Foundation website at www.specialacademy.org.
4. Applicant shall submit a written personal statement describing the Applicant's commitment to Art.
5. Application must be submitted by e mail to specialacademy@gmail.com and must reference "Academy of Special Dreams Foundation Scholarship Fund. Each application will be acknowledged upon receipt. All notifications will be by e mail.

APPLICATION

Applications will be made available at the Academy of Special Dreams Foundation website at www.specialacademy.org. Each application shall include the following information:

1. The name and location of the college, university, trade school, art school or other recognized art degree program where Applicant is currently enrolled or will be enrolled.
2. The Applicant's intended field of study or major in any field of Art.
3. A written personal statement not exceeding two pages about the Applicant's journey as an artist, including the Applicant's expressed commitment to the intended field of study or major in any field of Art.
4. Applicant's contact information.

5. Applicant's Portfolio submission of five (5) unique works of Art for review.
6. Completed and signed Release permitting the Academy of Special Dreams Foundation to feature the Applicant's Portfolio submission on the website www.specialacademy.org.

APPLICATION REVIEW AND DECISION

Each application will be reviewed by the Board of Directors of the Academy of Special Dreams Foundation. The Board of Directors will endeavor to respond to each Applicant within four (4) weeks after receipt of a fully completed application. The review of each application will be based primarily on the Applicant's express commitment to a study or major in any field of Art and the desire to continue as a working artist.

The number and total amount of scholarships to be awarded by the Academy of Special Dreams Foundation will depend on the number of applications and the amount of funding received for such scholarships.

Please type or print:

Personal Information

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country if outside USA: _____

Telephone Number: (____) _____ Today's Date: _____

E-mail Address: _____

Disability or Medical condition: _____

Educational Information

High School: _____

City: _____ State: _____ Year Graduated: _____ GPA: _____

College: _____

City: _____ State: _____ Hours Completed: _____ GPA: _____

Major / Intended Major: _____ Full-Time or Part-Time (circle one)

APPLICANT STATUS (please check one):

_____ Working Artist
_____ Art Student (High School, College, University, Art school)

Emphasis Interest (please check all that apply):

_____ Design
_____ Painting/Drawing
_____ Photography

_____ Sculpture
_____ Video, Animation
_____ Undecided

SPECIAL ACHIEVEMENTS/HONORS AND RECOGNITION

EXTRACURRICULAR ACTIVITIES/COMMUNITY INVOLVEMENT/EMPLOYMENT

CHECKLIST for application:

- This completed application form
- One-page artist's statement
- 10 image portfolio (CD format), with name & media (i.e.: ink, watercolor, photography)
- Statement of treating physician or other healthcare provider describing disability or medical condition