

Application for the Erling and Julia Indahl Scholarship

APPLICANT MUST TYPE ALL INFORMATION INTO THIS FORM. We will not accept handwritten applications.

Submission Deadline

Applications are due by 5:00 pm on the third (3rd) Wednesday of every month. Applications will be accepted September – November and January – April, pending availability of funding.

Eligibility Criteria

- Evidence of a visual disability
- Matriculation as a registered Temple student in Academic Good Standing (You must have attended Temple at least one [1] semester and be enrolled in a program leading to a degree)
- Registration with Temple University Disability Resources and Services (DRS) (Please refer to [Temple's Disability webpage](#) to learn about this process)
- Applicant must provide evidence of exploring other sources of funding
- **THANK YOU LETTER:** Successful applicants who receive scholarships must submit a thank you letter to the DRS Scholarship Review Committee within four (4) weeks of receiving the award. Submission of a thank you letter is required for consideration for future DRS scholarships.

Authorization/Certification for the Erling and Julia Indahl Scholarship

Through my signature, I certify that I am eligible for consideration of the Erling and Julia Indahl Scholarship and that I meet all eligibility criteria listed. I authorize DRS Scholarship Review Committee to review financial and academic records to verify my eligibility.

Name

Date

**Submit To: Disability Resources and Services
100 Ritter Annex
1301 Cecil B. Moore Avenue
Philadelphia, PA 19122**

Application for the Erling and Julia Indahl Scholarship

Date Submitted: _____

Semester of Funding: (choose one) Fall Spring Summer

Personal Information

Name	
TUId	
Address	
Temple Email	
Phone	
Alternate phone	

Which of the following categories includes your disability? (select all that apply)

- Blind Retinal disease Glaucoma Low vision
 Cataracts Albinism Other visual disability (specify) _____

Your Academic Profile

Your Major	
Degree Sought	
Transfer Credits	
Total Credits at Temple	
Full Time/Part Time	
Current Credits Registered	
Cumulative GPA	

Total Aid Requested (Total of all DRS scholarships received all semesters at Temple cannot exceed \$5,000). \$

Provide detailed information regarding the expenses associated with your request. Type information below: (i.e., cost of each textbook; cost of software; cost of tutoring, including number of hours required & cost per hour; etc.)

Note: You may be required to submit receipts for expenses incurred.

PLEASE TYPE your responses to each of the following questions. Each response is limited to 1,000 characters or less:

1. What are your educational and career goals?

2. How will this award help you in meeting these goals?

3. How is your request specifically related to your disability?

4. Please describe your efforts to secure funding from public disability agencies or other available financial resources. We may request documentation to support your statements.

Application Check List: (please check each item to indicate that you have read and followed the instructions)

Type your responses to all questions on this application

Type your name and date the authorization/certification on the first page

If you have questions as you complete your application, please email your questions to drs@temple.edu and write “Scholarship Application” in the subject line.