

Postsecondary Education Scholarship Illinois Council for Exceptional Children (ICEC)

Eligibility Requirements & Application

1. The applicant must be an Illinois resident with verification of disability who plans to enter an Illinois college, university, trade or technical school.
2. The applicant must have a minimum of 2.5 grade point average based on a 4.0 scale in high school.
3. The applicant must submit the following:
 - a. An application (attached below)
 - b. A copy of your official high school transcript (please remove your social security number)
 - c. Evidence of high school enrollment in a special education program.
 - d. An official acceptance letter from an Illinois college, university, technical, or trade school.
 - e. Two letters of recommendation. One must be from a teacher.
4. Deadline for this application is **Friday, March 10, 2023**.

*Please **do not include** your social security number or any other personal ID numbers in your materials.*

ILLINOIS COUNCIL FOR EXCEPTIONAL CHILDREN
Post-Secondary Education Scholarship Application

Name of Applicant:

First Name

Last Name

Home Address:

Street

City

State

Zip Code

Phone Number:

Area Code

Phone Number

Email:

Education

Name of High School:

High School Address:

Street

City

State

Zip Code

Date of Graduation:

Tell us about yourself:

For example, you can talk about your strengths as a student, talk about your career goals, or talk about why post-secondary education is important to you.

Tell us about any clubs or organizations that you participated in.

Name of Club or Organization	Dates of Participation	How You Participated, Including Responsibilities.
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Tell us how you plan to use the scholarship funds.

Activity or Program	How Much It Costs	How Will You Use the Scholarship Money
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Tell us how the school that you will go to next year will help you reach your goals.

Checklist:

Copy of transcript (remove or black out social security number)

Two letters of recommendation (one letter must be from a teacher)

Completed application form

Email your completed application to Dr. Sarah Ballard at slballa@ilstu.edu or mail your application to the following address:

Sarah Ballard
Illinois State University
512 DeGarmo Hall
Campus Box 5910
Normal, IL 61790-5910

Please report any accessibility concerns with this application to Dr. Sarah Ballard at slballa@ilstu.edu