

Jacki Marcus Student Scholarship Application

To apply for the Jacki Marcus Student Scholarship, you must submit a complete application (either on line or via mail). All parts of the applications must be received no later than January 17, 2020. Applicants will be notified by February 7, 2020.

* Required

1. Applicant's Name *

2. Date of Birth *

Example: December 15, 2012

3. Student's Mailing Address *

4. Student's Phone Number or Email address *

5. Anticipated Graduation Date *

Example: December 15, 2012

6. Current School Name *

7. Current School Address *

8. School or program that I plan to attend after high school. *

9. Which of the Jacki Marcus Student Scholarship options are you applying for? *

Mark only one oval.

Vocational (please email if you are unsure if your program falls under this category itdhh2019@gmail.com)

Academic

10. Extracurricular Activities (include years and offices held) *

11. Volunteer Community Involvement, Organization Involvement, and/or Work Experience (include years) *

Signatures

School Representative Signature

Student must provide the name, title and phone number of a school representative who can certify that this student will graduate on the above date or is currently attending a precollege program and that the student is in good standing. Transcripts are NOT required.

**Please note- student must be a resident of Illinois.

**ITDHH reserves the right to contact the school representative of students who are finalists for the scholarship to verify information.

12. Name and Title of School Representative (Principal, Director, or Counselor) *

13. Phone Number of School Representative *

14. Student Signature *

By entering your name above, you are verifying that all of the information submitted is correct at the time of submission.

Essay

All academic applicants are required to submit an essay that (1) summarizes your course of study and/or goals for the future and (2) describes your hearing loss and how it has affected your life.

Vocational applicants- Please type (1) a summary discussing your course of study and/or goals for the future and (2) a description of your hearing loss and how it has affected your life.

-OR-

Submit a video of yourself (1) discussing your course of study and/or goals for the future (clearly describe the occupation you wish to obtain after completion of your post-secondary program) and (2) a description of your hearing loss and how it has affected your life. A parent or teacher may help you. Please submit this video in DVD format with the rest of your application to the address listed below or upload to YouTube as a private video and include the link in the blank provided.

If you are submitting the application online, it is recommended that you type up your essay in a word processing program and then copy and paste it into this form.

15. Essay *

16. If you are submitting a video for the vocational option, please enter the link below:

If you are submitting a DVD, please mail it to the address below:

Kayla Mattus
110 Logan Rd
Marquette Heights, IL 61554

Letters of Recommendation

You must submit THREE letters of recommendation with this application. Please keep a copy of this application for your records. The reference form can be found at the link below. Letters may be mailed to:

Kayla Mattus
110 Logan Rd
Marquette Heights, IL 61554

or emailed to: itdhh2019@gmail.com

Link to the recommendation letter form:
<https://forms.gle/jmxFGHvX5b76Tuow8>

Rubrics

You can view the rubrics being used to score applications at the links below:

Academic Rubric:
https://docs.google.com/document/d/1UVEgswU3W4MzD5Ob_NcWiHvQP8pQ1xeufn1e4lg6AR4/edit?usp=sharing

Vocational Rubric:

<https://docs.google.com/document/d/122ogRVdHyK79GbYPbXIKXTMRr3CJfBOy1cWjoJIP5ew/edit?usp=sharing>

Questions

If you have any questions about the application or the process, please contact Kayla Mattus at:

itdhh2019@gmail.com or 309-712-8333 (voice or text)

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