



PURPOSE

The Gavalas-Kolanko Foundation (GKF) is a public charity established to help students with physical disabilities reach their secondary educational goals. The GKF awards scholarships to students with physical impairments (sight, hearing, movement) at the College of Charleston.

FIRST-TIME APPLICANTS

To qualify for the scholarship, first-time applicants must complete this form, in detail, with all supporting documents indicated below and return it to Deborah Freel Mihal, Director of the Center for Disability Services at the College of Charleston —no later than **July 26th, 2019**. The scholarship is renewable for up to four years, subject to the applicant's request for renewal, the applicant's continued suitability for the scholarship, and available funding of the GKF.

RENEWAL APPLICATIONS

The GKF scholarship is not automatically renewed. Previous C of C recipients who wish to renew the scholarship must submit (a) current academic transcripts and (b) an updated list of extra-curricular/community service activities to Deborah Freel Mihal, Director of the Center for Disability Services.

SELECTION PROCESS

The GK Foundation Board will review all new and renewal applications and

then award 2019-2020 scholarships, based on applicant suitability and current GFK funding resources. If selected, award recipients will receive notification during the Fall semester of the current academic year. The scholarship award will be applied to your Spring semester financial aid awards.

SELECTED APPLICANTS

Scholarship recipients should be prepared to serve as an ambassador/spokesperson of the Foundation, and participate in GKF-related social and civic functions throughout the scholarship year. In particular, the pleasure of your presence is requested at the Foundation's largest fundraiser of the year—the Charleston James Island Connector Run (CJICR). Typically, the event has been held on "Students with Disabilities Day," proclaimed by Mayor Joe Riley, Jr. This year's CJICR is **October 26, 2019**.

SUPPORTING DOCUMENTATION FOR FIRST-TIME APPLICANTS

In addition to completing the Personal Information Section below, first-time applicants must submit all of the following items, along with their application:

- a. Personal letter outlining your educational and vocational goals
- b. Complete, official transcript of your academic record (2.5 minimum GPA for undergraduate applicants and 3.0 minimum for graduate applicants)
- c. List of extra-curricular activities and organizations
- d. Two letters of recommendation; one must be from a former teacher. Letters of recommendation from a family member are not acceptable for this purpose.
- e. Picture of yourself

PERSONAL INFORMATION SECTION

1. Name _____
2. Home Phone () _____

3. Cell Phone () _____
4. Campus Address _____
 City _____ State _____ Zip _____
5. Permanent Address (if different then above) _____

6. Email Address _____
7. Date of Birth _____
8. Nature of Disability _____
9. Name of parent(s) or guardian(s) _____
10. High School _____ City/State _____
11. Year of HS graduation _____ Standing in class/ GPA _____

For Graduate Students Only	
Bachelor Degree Awarded	
Date Degree Conferred	
Name of Institution	

12. Field of College Study: _____
 Major/Minor _____
13. Class standing at College of Charleston in Fall 2019: Freshman _____
 Sophomore _____ Junior _____ Senior _____
 Graduate Student _____

14. Extra-curricular activities while in college (school and community)

15. Have you been accepted for admission to the College of Charleston? _____

16. Are you willing to appear at Foundation functions as an ambassador/spokesperson? _____

FINANCIAL INFORMATION

17. Are you currently employed full or part time? [] Yes [] No

18. If currently employed, where and how many hours per week? _____

19. List previous scholarships and amounts awarded each year. Please note which scholarships will be awarded for the 2019-2020 school year: _____

20. List source and amounts of any current student grant or loan aid. Please include any student grant or loan aid for the 2019-2020 school year: _____

21. Please complete the following budget with estimated income and expenses for the year 2019-2020:

ESTIMATED INCOME		ESTIMATED EXPENSES	
Funds from Parents	\$ _____	Tuition:	\$ _____
From Work:	\$ _____	Books/supplies:	\$ _____
From Savings:	\$ _____	Housing/food:	\$ _____
Scholarships/grants	\$ _____	College activities:	\$ _____
Student Loans:	\$ _____	Misc. Expenses:	\$ _____
Other sources	\$ _____	TOTAL	\$ _____
TOTAL	\$ _____		

22. Additional information you would like to share with us so we may know you better:

By my signature below, I certify that the information submitted in my application and supporting documents are true, complete and correct. I understand that if I have provided false information, I will forfeit any scholarships and will be subject to code of conduct disciplinary action at the College of Charleston.

Signature: _____ Date: _____

Send the completed form and additional requirements to:

Deborah Freel Mihal, MSW
Director, Center for Disability Services
College of Charleston
66 George Street
Charleston, South Carolina 29424

Office location: Lightsey Center, Suite 104
Telephone: (843) 953-1431 Fax: (843) 953-7731

Note: If you do not currently receive accommodations through the Center for Disability Services, you must make an appointment with Deborah Freel Mihal, Director of the Center for Disability Services, to submit your application packet in person.

For more information on the Gavalas Kolanko Foundation, visit us on the web at www.gkfoundation.org. For more information on the Charleston James Island Connector Run/ Walk, visit www.jicrun.com.