

**Application
Stenswick/Benson Scholarship**

Applicant Name: _____ Date: _____

Address: _____

Employing Organization: _____

Home Phone: _____

Work Phone: _____ Fax: _____

Email address: _____

College or University: _____ Currently in approved program? _____

Working toward what degree or license? _____ Area _____

Applicant Signature: _____

Applicant Questions

On a separate sheet of paper, please comment on each of the following, and submit to your Special Education Director for his/her comments. The Special Education Director will then submit this to the Scholarship Committee.

1. How would you describe your career goals?
 2. What impact do you believe you can make with this degree and/or license?
 3. How do you intend to enhance opportunities for persons with disabilities?
 4. How will you carry out a long term commitment to the field of special education?
 5. What do you plan to do to further the study and practice of special education?
 6. Describe your leadership experience and potential.
-

Name of Director of Special Education: _____

Do you recommend this applicant and why? (Address your relative value for this candidate in your remarks)

How would you predict this candidate to have both a significant impact in this field and the resiliency to continue to contribute over time?

Signature of Director of Special Education: _____

Applications must be submitted by April 1, 2012 to Candy Malm, MASE SCHOLARSHIP COMMITTEE, PAWN Cooperative, 301 Huntsinger Avenue, Park Rapids, MN 56470.