



Wayne County Committee
For Crippled Children & Adults, Inc.

www.wcccca.org
PO Box 406 * Wooster, Ohio 44691

Wayne County Committee for Crippled Children and Adults

AL AND JUDY VAN WIE SCHOLARSHIP APPLICATION

Name _____ Telephone _____

Email Address _____ Cell # _____

Address _____

County _____ Parent(s) _____

Describe your disability _____

Additional special circumstances the scholarship committee should consider:

College(s) and/or Trade Schools you are planning to attend _____

CRITERIA FOR SUCCESSFUL SCHOLARSHIP CANDIDATE:

1. Wayne County Resident
2. Physical disability
3. Commitment to advanced educational or vocational training

INSTRUCTIONS:

1. Complete the application form, accurately and in full.
2. Submit a copy of your current high school transcript.
3. Prepare a one page description of yourself, including a statement of your involvement in school and community activities and a description of your professional or occupational goals.
4. Arrange for a letter of recommendation from an instructor at your high school. This letter must be submitted with your application.

I hereby certify that the foregoing statements and all included documentation are true to the best of my knowledge and belief.

Student Signature

Date

Parent Signature

Date

Return to: Wayne County Committee for Crippled Children and Adults, PO Box 406, Wooster, OH 44691