Gary Moll Memorial Scholarship Fund
for Students with Disabilities
Nomination & Application Form

**Nomination Form**
Must be completed by an Independent Living Center staff member

Name of Applicant’s sponsor: ________________________  Sponsoring CIL: ________________

E-mail address of sponsor: ________________________________

Sponsor’s position at the CIL: _____________________________

Signature of Sponsor: ____________________________________________________________

Name of Nominee: __________________________________________

Most recent/current school attending: _________________________________

Current year in school (select one)

_____ Current high school senior

_____ Currently attending college. If so, year in school _____________

_____ Will be/are attending an accredited vocational school
Gary Moll Memorial Scholarship Fund
Application form
To be completed by the Applicant

1. Personal Profile of the Applicant:

Name of the Applicant: ____________________________________________

(Last) (First) (M.I.)

Physical Address: ____________________________________________

(Street, house/apt. #)

Mailing Address (if different than above)

__________________________________________

City/State/Zip Code: ____________________________________________

Sponsoring Independent Living Center: _____________________________

Disability: _____________________________________________________

2. Academic Profile

What year did you graduate from high school? __________

Chose one of the following:

_____ I am currently registered at a Missouri college/university or accredited vocational school

_____ I have been accepted and plan to register at a Missouri college/university or accredited vocational school.

Give the full name of the college/university/vocational school

____________________________________________________________

Provide the quarter or semester and year of admission: ______________

Your cumulative high school GPA: ______________

College/university/vocational school GPA: ______________

Please list your major/minor, or program of study: ____________________________

____________________________________________________________