



DMAC Impact Foundation

Email: admin@dmacimpact.org

Website: www.dmacimpact.org

Scholarship Application Form

[Note: Please complete all sections of this application form and submit it by the specified deadline. Incomplete applications will not be considered.]

Personal Information:

Full Name: _____

Date of Birth: _____ Gender: _____

Street Address: _____

[City, State, ZIP Code]

Phone Number: _____

Email Address: _____

Education Information:

High School Name: _____

High School Graduation Date: _____

Current GPA: _____

Intended College/University: _____

Intended Major/Field of Study: _____

Extracurricular Activities and Achievements:

Please list any extracurricular activities, clubs, or organizations you have been involved in, as well as any notable achievements or awards you have received. Use additional sheets if necessary.

- Activity/Award: _____
Role/Position: _____
- Activity/Award: _____
Role/Position: _____
- Activity/Award: _____
Role/Position: _____

Essay Questions:

Please respond to 2/4 of the following essay questions in a thoughtful and concise manner. Each essay should be no more than 500 words.

- How has your involvement in athletics influenced your personal and academic growth?
- Explain how Crohn's disease has affected your life and how you have overcome challenges related to Crohn's disease.
- Explain why you want to enter the mental health field and how you intend to make a difference for individuals with chronic illnesses.
- Describe 2 character traits you feel you encompass that have helped you be resilient and successful.

References:

Please provide contact information for two references who can speak to your character, academic abilities, or community involvement.

Reference 1:

Name: _____

Relationship to Applicant: _____

Phone Number: _____

Email Address: _____

Reference 2:

Name: _____

Relationship to Applicant: _____

Phone Number: _____

Email Address: _____

Submission Instructions:

Please submit your completed application form along with your essay responses and any additional documentation to the DMAC Impact Foundation by the deadline specified on our website.

Mailing Address:

1880 Palisades Dr
Lake Ozark, MO 65049

Email Address for Electronic Submissions:

admin@dmacimpact.org
Application Deadline: May 1, 2024

For any questions or inquiries regarding the scholarship application process, please contact the DMAC Impact Foundation at 573-280-5254 or admin@dmacimpact.org.

By signing below, I certify that all information provided in this application is accurate and complete to the best of my knowledge.

Applicant's Signature: _____

Date: _____