

**Association for Education and Rehabilitation  
of the Blind and Visually Impaired  
Illinois Chapter**

**Scholarship Application**

The IAER awards yearly scholarships, up to \$750, to student(s) holding junior or senior, graduate student, or post graduate status who is enrolled in class(es) leading to certification areas in the field of education/rehabilitation of persons who are blind or visually impaired. The applicant should reside and/or attend school in the state of Illinois.

**Application Requirements:**

1. Completed Application form (typed)
2. Transcripts (most recent)
3. 200-word essay on *“Why I have chosen to enter the field of education/ rehabilitation for persons who are blind or visually impaired.”*
4. Three references with contact information

**Application Deadline: December 18, 2020**

**Scholarship Awarded: February 2021**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I hereby apply for an IAER Scholarship. I agree to abide by the decision of the scholarship committee.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

List academic achievements. (Awards and citations)

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List extracurricular activities. (Include clubs, organizations, offices held, creative projects, etc.)

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Give a brief history of employment.

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Give a brief history of volunteer experiences.

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References:

1. Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Connection to Applicant \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Connection to Applicant \_\_\_\_\_

3. Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Connection to Applicant \_\_\_\_\_

**Please have the application, essay and transcripts sent to:**

Dayna Brzezowski, IAER Scholarship Chairman  
Hines VA Blind Rehabilitation Center  
5000 S. 5th Ave  
Bldg 113  
Hines, IL 60141  
**or email to:**  
Dagrism@gmail.com