



## PURPOSE

The Gavalas Kolanko Foundation (GKF) is a public charity established to assist students with physical disabilities reach their secondary educational goals. The GKF awards scholarships to students with physical impairments (sight, hearing, movement) at The Medical University of South Carolina (MUSC).

## FIRST-TIME APPLICANTS

First-time applicants must complete the attached form with all indicated documents and return it to Ms. Stephanie T. Price, Director of Equity, EEO and University Services—no later than **July 28, 2023**.

## RENEWAL APPLICATIONS

The scholarship is renewable for up to four years, subject to the applicant's request for renewal, the applicant's continued suitability for the scholarship, and available funding of the GKF. Previous MUSC recipients, who wish to renew the scholarship, must submit (a) current academic transcripts and (b) an updated list of extra-curricular/community service activities to Ms. Stephanie T. Price, Director of Equity, EEO and University Accessibility Services.

## SELECTION PROCESS

The Foundation's board will review all new and renewal applications. After reviewing all applications, the board will award 2023-2024 scholarships, based

<https://gkfoundation.org/scholarships/>

on applicant's suitability and current GFK funding resources. If selected, award recipients will receive notification during fall semester of the current academic year. The scholarship award will be applied to your spring semester financial aid awards.

## SELECTED APPLICANTS

Scholarship recipients should be prepared to serve as an ambassador/spokesperson of the Foundation and participate in GFK-related social and civic functions throughout the scholarship year. In particular, the pleasure of your presence is requested at the Foundation's largest fundraiser of the year—the Charleston James Island Connector Run (CJICR). Typically, the event has been held on "Students with Disabilities Day," proclaimed by Mayor Joe Riley, Jr. This year's CJICR date will be **October 21, 2023**.

## SUPPORTING DOCUMENTATION FOR FIRST-TIME APPLICANTS

In addition to completing the Personal Information Section below, first-time applicants must submit all of the following items, along with their application:

- a. Personal letter outlining your educational and vocational goals
- b. Complete, official transcript of your academic record (2.5 minimum GPA for undergraduate applicants and 3.0 minimum for graduate applicants)
- c. List of extra-curricular activities and organizations
- d. Two letters of recommendation; one must be from a former teacher. Letters of recommendation from a family member are not acceptable for this purpose.
- e. Picture of yourself
- f. Financial Information Form (located at the end of this application)

## PERSONAL INFORMATION SECTION

1. Name \_\_\_\_\_
2. Home Phone ( ) \_\_\_\_\_
3. Cell Phone ( ) \_\_\_\_\_
4. Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
5. Permanent Address (if different then above) \_\_\_\_\_  
 \_\_\_\_\_
6. Email Address \_\_\_\_\_
7. Date of Birth \_\_\_\_\_
8. Nature of Disability \_\_\_\_\_
9. Name of parent(s) or guardian(s) \_\_\_\_\_
10. University \_\_\_\_\_ City/State \_\_\_\_\_
11. Year of graduation \_\_\_\_\_ Standing in class/ GPA \_\_\_\_\_

<b>Undergraduate Program Institution</b>	
Bachelor's degree Awarded	
Date Degree Conferred	
Name of Institution	

12. Field of College Study: \_\_\_\_\_

Current Program \_\_\_\_\_

13. Current Program Year at MUSC in Fall 2023: First Year [ ] Second  
Year [ ] Third Year [ ] Fourth Year [ ] Graduate Studies [ ]

14. Extra-curricular activities while in college (school and community):

---

---

---

---

---

---

---

---

15. Have you been accepted for admissions to The Medical  
University of South Carolina as a new student? \_\_\_\_\_

16. Are you willing to appear at Foundation functions as an  
ambassador/spokesperson? \_\_\_\_\_

17. Additional information you would like to share with us, so we may know you better:

---

---

---

---

---

---

---

---

**Financial Information Form:**

Are you currently employed full or part time?  Yes  No

If currently employed, where and how many hours per week?

---

List previous scholarships and amounts awarded each year. Please note which scholarships will be awarded for the 2023-2024 school year:

---

---

---

---

---

---

---

List sources and amounts of any current student loans. Please include any student loans for the 2023-2024 school year:

---

---

---

---

Please complete the following budget with estimated income and expenses for the year 2023-2024:

ESTIMATED INCOME		ESTIMATED EXPENCES	
Funds from Family	\$	Tuition	\$
from Work	\$	Books	\$
from Savings	\$	Supplies	\$
from Loans	\$	Housing/food	\$
from Scholarships	\$	College Activities	\$
from VET Benefits	\$	Misc. Expenses	\$
from Other Sources	\$		
TOTAL	\$	TOTAL	\$

---

Signature of applicant

---

Date