



## Transplant Recipients International Organization, Inc.

### 2012 Scholarship Application

TRIO will be awarding several non-renewable \$1,000 scholarships to transplant candidates, recipients, donors, and their immediate\* family members. After selection is made by the Scholarship Committee, awards will be announced in the fall of 2012.

### Applicant Criteria

#### **Applicant must:**

- ◆ be a TRIO member or an immediate family member\*. (If you are not yet a member, TRIO encourages you to join a local chapter. If you have no local chapter, you may join as a Member at Large, online at [www.trioweb.org](http://www.trioweb.org), or ask for an application form: email [info@trioweb.org](mailto:info@trioweb.org).)
- ◆ be a solid organ or bone marrow candidate, recipient, donor, or an immediate family member\*;
- ◆ have a cumulative grade point average of 2.5 or better;
- ◆ provide a current transcript;
- ◆ submit a statement about “How transplantation has affected my life”;
- ◆ have financial need;
- ◆ submit a statement of educational objectives and future life goals;
- ◆ submit 3 letters of recommendation;
- ◆ provide a copy of the acceptance letter to an accredited college, university, or trade/technical certificate program, (if an incoming freshman or returning adult student);
- ◆ use Scholarship Award for continuing education at an accredited college, university, or trade/technical school certificate program during the 2012-2013 academic year. (The award will be sent directly to the institution in the student’s name); and
- ◆ not be a previous TRIO scholarship recipient.

(\* immediate family member = parent, child, spouse or sibling of TRIO member.)

### Application Submission

Please submit hard copy of completed application and related materials  
**postmarked by June 30, 2012** to:

**TRIO Scholarship Committee  
2100 M Street NW  
Suite #170- 353  
Washington, DC 20037-1233**

**Incomplete or late applications will not be considered.**



# Transplant Recipients International Organization, Inc.

## 2012 Scholarship Application Form

### Contact Information

*Please Type or Print*

NAME \_\_\_\_\_  
*First Middle Last*

ADDRESS \_\_\_\_\_  
*Street Apt. No.*

\_\_\_\_\_  
*City State Zip Code*

PHONE (\_\_\_\_\_) \_\_\_\_\_  
*Home Work*

E-mail \_\_\_\_\_

### Transplant/Donor Information

Are you a TRIO Member? Yes  No

If not, name of family member who is: \_\_\_\_\_

Name of TRIO Chapter \_\_\_\_\_ OR: Member At Large

When did you or your family member become a member of TRIO? Year: \_\_\_\_\_

YOU ARE A (select one):

Transplant Candidate:  \_\_\_\_\_  
*Type of Transplant*

Transplant Recipient:  \_\_\_\_\_  
*Type of Transplant Date*

Family Member:  \_\_\_\_\_  
*Relationship to Candidate or Recipient*

Donor Family Member:  \_\_\_\_\_  
*Relationship to Donor*

Living Donor:  \_\_\_\_\_  
*Relationship to Recipient*

### Education Information

High School: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Graduation: \_\_\_\_\_ G.P.A. \_\_\_\_\_

College/University: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Graduation: \_\_\_\_\_ G.P.A. \_\_\_\_\_

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**Family Information**

Name of Father or Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Name of Mother or Guardian: \_\_\_\_\_ Occupation: \_\_\_\_\_

Names/Ages of other dependent family members:

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

**Additional Required Materials:**

**Also include (*attach statements*):**

- Personal Statement describing personal history, educational and career ambitions. (not more than 500 words)
- Statement describing extracurricular and/or volunteer activities.
- Current transcript (high school or college, these do not have to be certified).
- Acceptance letter from College or University (if incoming freshman or adult returning student).
- Financial Needs Form completed
- Letters of recommendation (3 Academic and/or Personal).
- List of Honors and/or Awards.
- Statement about how transplantation has affected your life.

**I agree to the terms of the scholarship and certify that the above information is true and accurate to the best of my knowledge.**

\_\_\_\_\_  
*Applicant's Signature*

**APPLICATION DEADLINE: Postmarked by June 30, 2012**

Mail Completed Application To:  
**TRIO Scholarship Committee**  
**2100 M Street, NW, Suite #170-353**  
**Washington, D. C. 20037-1233**

**(2012 Scholarship Applications must be submitted in hard copy;  
email applications are not accepted.)**

**Incomplete or Late Applications Will Not Be Considered.**  
**Transplant Recipients International Organization, Inc.**

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## FINANCIAL NEEDS STATEMENT

\_\_\_\_\_ (Social Security # will be requested if needed)  
NAME \_\_\_\_\_

TUITION PER SEMESTER/YEAR: \_\_\_\_\_

ROOM & BOARD \_\_\_\_\_

BOOKS/SUPPLIES \_\_\_\_\_

MEDICAL INSURANCE \_\_\_\_\_

OTHER COSTS \_\_\_\_\_

TOTAL EXPENSES \_\_\_\_\_

### FINANCIAL AID RECEIVED (OTHER GRANTS/AWARDS)

(THIS DOES NOT MEAN FAFSA LOANS SUBSIDIZED OR UNSUBSIDIZED)

-\$ \_\_\_\_\_

\$ \_\_\_\_\_

-\$ \_\_\_\_\_

-\$ \_\_\_\_\_

-\$ \_\_\_\_\_

Work Study Program YES NO Approximate Hourly Rate/Hours \_\_\_\_\_

Will You Work Part Time During School? Approximate Earnings \_\_\_\_\_

Student Savings \_\_\_\_\_

Student Income \_\_\_\_\_

If Under 24, Parents Adjusted Gross Income \_\_\_\_\_

If Over 24, Student's Adjusted Gross Income \_\_\_\_\_

How Many Others In Your Family Attending College This Year? \_\_\_\_\_