

*Vision Services of Washington-Greene Presents its
Annual Richard T Robinson Scholarship*

This Scholarship, presented by the Vision Services of Washington-Greene is open to any high school senior who resides in Washington or Greene County, who is blind, legally blind, or is the child of blind or legally blind parent(s); or is pursuing a career working with disabled individuals. The student must enter a college, university, or trade school in the fall, 2021. Only one scholarship is given in the amount of **\$1,000**. The deadline for the Scholarship application is **April 30, 2021**. All entries must be postmarked by the deadline to be reviewed for the award. The winner will be contacted on or before May 7, 2021.

(If you need more room, attach a piece of paper with your name and the question(s) along with the rest of your response).

Name: _____
First MI Last

Address: _____
Street Apt.

City State Zip

Home Phone: (____) _____
Area Code

County you live in: _____

Sex: _____ Date of Birth: _____
Male Female month/day/year

E-mail address: _____

I am: 1) __ blind 2) __ legally blind 3) __ a child of blind or legally blind
parent(s)

If third is marked, please list your parent(s):

Name of High School: _____

Address: _____

Guidance Counselor: _____

Phone # of Counselor: (_____) _____
Area Code

Grade Point Average: _____ Graduation Date: _____
(after junior year)

What area of study are/were you taking in High School? _____
(business, vocational, honors, regular)

What organizations or activities have you been involved in the last 4 years?

List any leadership roles. _____

Have you received any awards/honors? If so, please list them. _____

What are your educational interest(s) and/or potential major? _____

Please answer one of the following essays between 500 and 1,000 words. The essay must be typewritten, double-spaced, and submitted on a separate sheet of paper. The essay will be judged on the following criteria:

50 % Content

25 % Creativity

25 % Presentation & Organization, including grammar, spelling, etc.

- 1) If your parent(s) is/are visually impaired, how has that affected your life and your upbringing?
- 2) In what ways has your visual impairment affected you?
- 3) If you had full vision, what would you do that you cannot do right now?

Please submit with your application:
proof of blindness either for yourself or your parents, copy of college/school
acceptance letter, 2 letters of non-family recommendation (ex. Pastor,
teacher, coach, etc.), and an official transcript.

Please mail application to:

The Scholarship Program
C/O VISION SERVICES OF WASHINGTON-GREENE
566 E. Maiden Street
Washington Pa 15301