***Gift of Voice is pleased to announce we have established a***

**Disclosure Scholarship**

The purpose of the Disclosure Scholarship is to encourage and reward students who have publicly disclosed their personal mental health experiences in healthy ways which positively impacts their local community. Here are the eligibility requirements.

1. Students must be currently enrolled and have a minimum of 90 college credit hours.
2. Students must submit completed application. See following pages for more details.
3. Students must submit an essay (500 word limit) which answers the following.
   * How have you disclosed your personal mental health experiences in healthy ways which have positively influenced your local community?
   * How will you use your education and degree to continue positively influencing and advancing mental health dignity in society?
4. Students must submit one letter of recommendation (one page, letterhead preferred) from someone which describes how your disclosure has positively influenced your community. Letter must include first and last name of author, a phone number where they can be reached and their email address. Letters may be authored by any person you choose to speak on your behalf; however, we recommend the following.
   * High-school teacher or college professor
   * Prosumer agency or disability organization
   * Community leader (including faith leader)



$500

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1. Name of Student Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please list the address where you would like a check to be mailed if you become the Disclosure Scholarship inaugural recipient.*

1. Have you completed a minimum of 90 college credit hours? YES | NO *Finalists will be asked to provide a school transcript to verify.*
2. Will you be the first in your family to earn a four-year degree? YES | NO *Be truthful, as you may be featured in media and/or social media.*
3. Do you have a disability of any kind? YES | NO *Finalists will be asked to provide verification from a physician or the Social Security Administration.*
4. By submitting this application, I agree to the following. *Please initial each item with which you agree.*

\_\_\_\_\_ I give permission for my photo and essay to be featured with media and on social media, regardless of whether or not I am selected to receive a scholarship.

\_\_\_\_\_ I give permission for Gift of Voice to contact and interview the person who authored my letter of recommendation.

\_\_\_\_\_ If I am selected as a finalist, within five business days of emailed notification, I will provide transcripts from my school which verifies I have completed a minimum of ninety credit hours. This documentation remains confidential and is solely for verification purposes.

\_\_\_\_\_ If I have indicated I have a disability of any kind and am selected as a finalist, within five business days of emailed notification, I will provide a letter from my Physician or the Social Security Administration which verifies my disability status. This documentation remains confidential and is solely for verification purposes.

\_\_\_\_\_ If I am selected as a finalist and fail to email the aforementioned verification items as a pdf attachment to [scholarship@giftofvoice.com](mailto:scholarship@giftofvoice.com) within five business days of emailed notification, I forfeit my finalist status and understand Gift of Voice will void and nullify my application.

\_\_\_\_\_ If I am selected as the 2021 Disclosure Scholarship recipient, I agree to become part of the 2022 Disclosure Scholarship Team to help select the 2022 scholarship recipient. This is a three-hour commitment and Gift of Voice will work around your schedule.

1. Signature: I certify that I have given true, accurate and complete information to the best of my knowledge.

Your signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted: \_\_\_\_\_\_\_\_\_\_

Gift of Voice signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Received: \_\_\_\_\_\_\_\_\_\_



$500

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**Disclosure Scholarship**

**INSTRUCTIONS:**

#1 – Email your completed application to [scholarship@giftofvoice.com](mailto:scholarship@giftofvoice.com) by noon (central time) on Tuesday, August 31, 2021. Type “Disclosure Scholarship” into the subject line of the email. Late submissions will not be reviewed or considered.

#2 – Scan the following documents and upload as attachments.

* Completed responses to items a–i (scanned pdf document)
* Essay about your disclosure (word document)
* Recommendation letter (pdf document)

#3 – Include one photo for media and social media purposes. Photo can be a formal professional headshot or informal fun photo. Requirements are as follows.

* You are the only person featured in the photo.
* No words, signs, logo’s or advertisements are visible.
* Email photo as a jpg file with your application.

**THINGS TO KEEP IN MIND:**

#1 – Gift of Voice is a mental health training and technical assistance center operated by people in recovery. We will do our best to answer questions you may have about the Disclosure Scholarship through noon (central time) on August 27, 2021. Answers will be posted on our website at [www.giftofvoice.com](http://www.giftofvoice.com). Just look for the red Disclosure Scholarship icon.

#2 – Regardless of who is awarded this scholarship, please know how much your mental health disclosure means. We encourage you to keep living your best life.