



**Paralyzed Veterans
of America**

Michigan Chapter

Educational Scholarship Program

Introduction

The Michigan Paralyzed Veterans of America (MPVA) is one of 34 chapters of Washington, D.C.-based Paralyzed Veterans of America. The mission of the MPVA is to enhance the lives of veterans with spinal cord injury or disease (SCI/D), as well as all citizens with disabilities, by advocating for civil rights, assuring quality healthcare, supporting continued research and education, and encouraging independence and healthy living through various health, sports and recreational programs.

Eligibility

Qualifying applicants must meet **ONE** of the following criteria:

- Someone with a disability, a paralyzed voting member, the spouse of a paralyzed veteran member, or an unmarried child under 24 years of age who is dependent on the member for principal support, **OR**
- An individual who is pursuing an educational field that will directly parallel the MPVA's mission. Qualifying field that may be considered will include: Nursing, Practical Nursing, Physical Therapy, Occupational Therapy, Recreational Therapy, Architecture, and/or Law.

In addition to the above criteria, qualifying applicants must meet **ALL** of the following:

- A state of Michigan resident
- Accepted or enrolled as a full-time or part-time student in a degree program at an accredited US college or university
- Able to demonstrate academic achievement

Scholarship Opportunities

MPVA's Educational Scholarship Program was established to support individuals who are committed to improving the quality of life of veterans and individuals with spinal cord injury or disease (SCI/D). On the next page you will find a listing of MPVA's current Scholarship Opportunities. Each opportunity was named after an important and influential person that positively affected the MPVA's mission. Please review these opportunities carefully. You may select any (or all) of the opportunities listed below, however, the MPVA will only provide a student with one (1) grant per academic semester. It should be noted that the application process does require your insight as to why you selected a particular scholarship opportunity (or opportunities) under the *Personal Statement* portion.

Scholarship Opportunities (*continued*)

Kenneth Huber Memorial Scholarship **\$1,000** **1 available**

As a supporter of the MPVA for nearly 40 years, Kenneth Huber demonstrated his outgoing nature by serving in multiple roles—ranging from MPVA Chapter President, National Director, advocate, and probably most importantly, friend. Ken spent his life serving others and drew satisfaction from it. He encouraged the disability community to take risks and demonstrated how to do so by actively participating in dozens of disability rights committees, acting as a peer counselor for the Ann Arbor Center for Independent Living, serving as a Deacon at his church, and was even inducted into the Athletes with Disabilities Hall of Fame.

Michael Hogue Memorial Scholarship **\$1,000** **1 available**

Michael Hogue fought in Vietnam with the 101st Airborne Division as paratrooper and was wounded in action. Although he lost the use of his legs, his struggles as a paraplegic were never complained about, and he always put the needs of others before him. He moved to Ann Arbor, MI after returning from Vietnam to recover and work for the Paralyzed Veterans of America as a veteran benefits counselor helping other veterans. While in Ann Arbor, he loved wheelchair racing, competing in marathons and The Paralyzed Veterans of America wheelchair games. He had a big heart and couldn't help sharing his gift of generosity to those that were close to him, as well as complete strangers, exhibited by his work with the spinal cord injury clinic at the VA Hospital in Ann Arbor.

Stephan Florescu Memorial Scholarship **\$1,000** **1 available**

Stephan Florescu was an amazing person and who accomplished many remarkable things throughout his 80 years. After being injured in a freak driving accident, Stephan became well known for his outstanding abilities in a variety of sports. Stef did not just use his talents for his own merits. He took his gift and began to inspire others by organizing various sporting teams and even began coaching them—for the MPVA, a civilian men's team called the "Rolling Romanians", and a women's team called the "National Association of the Physically Handicapped." Stefan was also a pioneer in MPVA's print publications, often writing for the MPVA's Rollin' Times Newsletter. His extraordinary talents will never be forgotten.

Roger McCarville Memorial Scholarship **\$500** **1 available**

Roger McCarville touched thousands of lives. Politicians, civic leaders, and every day people considered him as a friend. His life work as not to champion the causes of those with wealth or power, but to give a voice to those who were not heard. As a proud associate member of the MPVA, Roger used his gifts to advocate on behalf of countless many through the disability community. Among his work, he was best known for his 12 years hosting and producing the popular PBS show "Disability Today" (now known as a "wider World").

Tony Filippis Memorial Scholarship **\$500** **1 available**

Anthony (Tony) Filippis Sr., a nationally-known and beloved man was the founder of Wright & Filippis, Inc., Michigan's largest provider of home healthcare and services. Mr. Filippis dedicated his personal and professional life to assisting persons with disabilities. Not only was Tony a supporter and associate members of the MPVA, he was someone who experienced first-hand the frustration and heartache frequently confronted by persons with disabilities when he lost both of his legs below the knee in a train accident at the age of 13. The disappointments and discrimination he faced fueled Tony's passion for making a difference in the lives of others, including founding of the Athletes with Disabilities Hall of Fame in 1999.

Application Submission

The following information must be submitted in order to be considered for MPVA's Educational Scholarship Program:

1. Application: (See Pages 4-6)

2. Personal Statement: (See page 6)

The statement should explain why you wish to further your education and your short-and long-term academic and personal goals. This is also the time in which you may provide insight as to why you selected a particular scholarship opportunity. The statement should not exceed two typed pages.

3. Verification of Enrollment:

This can be in the form of a copy of your class schedule, confirmation of registration, or other documentation issued by the college or university.

4. Academic Transcript:

A copy of the applicant's grades from high school, college, or other accredited institution covering the most recent semester of quarter completed.

5. Two letters of recommendations: (See Pages 7 & 8)

One letter from a school official of your current or most recently attended school and a second letter from any individual other than immediate family member. To properly identify your letters of recommendation, please have each writer attach his or her letters to these pages.

Review of Application

The MPVA will select award recipients on several factors, including academic records, application information, and letters of recommendation, extracurricular activities, and a personal statement. All applicants will be notified in a timely manner of the grantee selections. Scholarship recipients must notify MPVA if they are no longer enrolled in school or if they do not maintain satisfactory progress toward the award of their degree at the time anticipated in the application.

Please note: scholarship funds are released solely in the name of the university. Under no circumstances will payment be made to the student.

Contact Information:

Applications to:

Jaelyn Kochis, Executive Director
Michigan Paralyzed Veterans of America
46701 Commerce Center Drive
Plymouth, Michigan 48170

If you have any questions, please contact us at: (248)476-9000 or jkochis@michiganpva.org



**Paralyzed Veterans
of America**

Michigan Chapter

FOR OFFICE USE ONLY

Application No. _____

Date Received _____

Educational Scholarship Program Application

Please print legibly or type

APPLICANT

Name: _____ Telephone: () _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: ___/___/___ Social Security Number: ___-___-___

If applicable:

Member's Name: _____ Relationship to Member: _____

Member's ID Number: _____ Chapter: _____

SCHOLARSHIP OPPORTUNITY

Please list the MPVA Educational Scholarship Opportunity (or opportunities) you would like to be considered for:

Scholarship Opportunity: _____ Dollar Amount: _____

EDUCATION PLANS

List the school you have been accepted for or are enrolled in as a full-time student. Attach verification of full-time status (e.g. letter of acceptance, class schedule, confirmation of registration).

School Name: _____ Telephone: () _____

Address: _____

City: _____ State: _____ Zip: _____

Dates Attended: (From) _____ (To): _____

Student's Address at School (if known): _____

City: _____ State: _____ Zip: _____

PAST EDUCATION

Beginning with the present or most recent school year, list all secondary and post-secondary institutions and trade schools you have attended:

School Name: _____ Telephone: () _____

Address: _____

City: _____ State: _____ Zip: _____

Dates Attended: (From) _____ (To): _____

GPA: _____ School's Passing Grade: _____

School Name: _____ Telephone: () _____

Address: _____

City: _____ State: _____ Zip: _____

Dates Attended: (From) _____ (To): _____

GPA: _____ School's Passing Grade: _____

School Name: _____ Telephone: () _____

Address: _____

City: _____ State: _____ Zip: _____

Dates Attended: (From) _____ (To): _____

GPA: _____ School's Passing Grade: _____

EXPERIENCE

List any honors or awards you have received:

- A. _____
B. _____
C. _____

List professional and related work experience (paid and volunteer):

- A. _____
B. _____
C. _____

List any extracurricular activities you have been involved in:

- A. _____
B. _____
C. _____

RELEASE

Permission is hereby granted to school officials from the above-listed schools to release scholastic records and other requested information for consideration in the MPVA Educational Scholarship Program, with the **exception** of the following:

I certify that the preceding information is true and correct to the best of my knowledge. I understand that all decisions rendered by MPVA and the Scholarship Committee on the award and administration of scholarships are final. If I am selected as a scholarship recipient, I authorize MPVA to use photographs, statements, or general information contained in this application for publicity purposes except the following items:

Student Signature: _____ Date: _____

(If the student is not an MPVA member) Member Signature: _____ Date: _____

PERSONAL STATEMENT

Please attach your personal statement to this form and send it directly to (personal statement should not exceed 2 typed pages):

Jaclyn Kochis, Executive Director
Michigan Paralyzed Veterans of America
46701 Commerce Center Drive
Plymouth, Michigan 48170



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Application No. _____

Date Received _____

Educational Scholarship Program Application

SCHOOL OFFICIAL-LETTER OF RECOMMENDATION

APPLICANT

Name: _____

Attending School: _____

SCHOOL OFFICIAL

Name: _____

Title: _____

School: _____

Address: _____

City: _____ State: _____ Zip: _____ Telephone: () _____

The above-named student is an applicant for the MPVA's Scholarship Program. To complete this application, we need a carefully considered appraisal of his/her character, ability, and, if applicable, performance as a student at your school. This information will be used only in connection with the selection of our scholarship recipients. We are particularly interested in the applicant's strengths and weaknesses, nonacademic as well as academic achievements and special contributions to the academic community and the community at large.

Please attach your letter of recommendation to this form and send it directly to:

Jaclyn Kochis, Executive Director
Michigan Paralyzed Veterans of America
46701 Commerce Center Drive
Plymouth, Michigan 48170



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Application No. _____

Date Received _____

Educational Scholarship Program Application

PERSONAL REFERENCE-LETTER OF RECOMMENDATION

APPLICANT

Name: _____

Attending School: _____

PERSONAL REFERENCE

Name: _____

Title: _____

School: _____

Address: _____

City: _____ State: _____ Zip: _____ Telephone: () _____

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