

## Dubin Center Scholarship Program

### **I. Selection Criteria**

#### **A. Priority**

The scholarship will be available to students who are high school seniors or graduates of Lee County Schools and who wish to further their educational pursuits. The scholarship is a one-time gift of \$1000.00. Students will be considered according to the following priority criteria:

1. Lee County School (public or private) students - Current seniors, or high school graduates who have postponed higher education for up to 2 years and are enrolling to begin college during the upcoming year.
2. Student must have had either a family member or volunteered with someone who has dementia.

#### **B. Qualifications**

1. Applications will be judged and ranked on a point system based on the information provided on the application form.
2. Students shall write a 500-word essay describing their experience or encounter with someone with dementia.
3. Student shall have a minimum unweighted GPA of 3.0.
4. Applications will be prioritized by a panel of judges that consist of Board & Advisory Council members of the Dubin Center.
5. Student must attend the Annual Board Meeting on May 16<sup>th</sup> at 5:30pm in Fort Myers.

### **II. Directions for Application**

- A. Each application must be typed with pages stapled in the upper left corner. Each application must include information in the following order:
  1. A completed application form (minus this one page of instruction).
  2. A 500-word essay on your experience with dementia (separate page – no smaller than size 12 font)
  3. Signed photo release and current photo of applicant
  4. Supplemental video about their experience with dementia. (Tik Tok, Insta, YouTube, etc.) Maximum of 3 minutes.
- B. Applicant must get two letters of recommendation (no longer than one page). Letters of recommendation must be scanned and emailed to [info@dubincenter.com](mailto:info@dubincenter.com) with the subject of the email being the word “scholarship” followed by the last name and first initial of the student applicant by the person writing the recommendation. One recommendation must be non-school related such as an employer, minister, or neighbor. One must be from a teacher, principal or advisor. None may be from a family member. (Recommendation forms are included with the application.)

C. Completed applications must be emailed to [info@dubincenter.com](mailto:info@dubincenter.com) with the subject of the email being the word “scholarship” followed by the last name and first initial of the student applicant no later than 03/31/2022.

**Dubin Center Scholarship Program**  
**APPLICATION FORM**

**Student's Full Name:** \_\_\_\_\_

**Student's Address:** \_\_\_\_\_

**Student's Email:** \_\_\_\_\_

**Phone Number: Home -** \_\_\_\_\_ **Cell-** \_\_\_\_\_

**I. Academics** (include a copy of high school transcript)

**GPA:** \_\_\_\_\_ **Class Rank:** \_\_\_\_\_ **out of** \_\_\_\_\_ **students**

**II. Volunteer Experience** (helping the elderly, church activity, community clean-up, yard work, volunteering to assist with city projects, etc.; please be specific, include dates and agency name, if possible)

**III. Honors and Awards Received in High School**

**IV. Leadership** (offices held in class or school organizations)

**V. Participation in Extra-Curricular Activities**

**VI. Out of School Activities and Leadership Positions Held** (i.e., hobbies, Scouts, Church, etc.)

**VII. Employment Experience** (beginning with most recent)

**VIII. College you Plan to Attend:**

**Course of Study:**

**Career Goal:**

**IX. Personal Statement of Future Goals**

(Use this page only, font size no smaller than 12 point)

**X. Last names, Telephone numbers, Addresses, and Relationships of two people whom you have asked to write recommendation letters.**

**Those writing recommendations may not be family members and only one may be school related.**

**(Letters must be emailed by the person writing the letter directly to the Dubin Center)**

**1. Name: Relationship:**

**Telephone Number:**

**Address:**

**2. Name: Relationship:**

**Telephone Number:**

**Address:**

**XI. Explanation of Special Circumstances**

**Use this space to concerns or special considerations about any part of this form.**

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**Signature of Student** **Date**

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**Print/Type Name of Student**

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**Signature of Parent/Legal Guardian** **Date**

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**Print/Type Name of Parent/Legal Guardian**

## **Essay on your Experience with Dementia**

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**Please write a 500-word essay about a positive or meaningful experience that you had with an individual with dementia. Discuss how this experience has impacted your life.**

**Essay must be typewritten, double-spaced, with one-inch margins, and no smaller than 12-point font. Please attach essay as a separate document directly after this page of the application.**

### **Photo Request and Release**

**Please enclose a current photograph of the applicant along with the attached release signed by both the applicant and their parent(s)/guardian.**

**A senior year photograph by a professional photographer is preferred. If such a photograph is not available, a head-and-shoulder photograph of the applicant is acceptable.**

**Photographs of the applicant with the family member or friend who the applicant wrote about in their narrative may also be used. Please include any photographs of that nature along with the applicant's photograph.**

**The photograph must be emailed to [info@dubincenter.com](mailto:info@dubincenter.com) with the rest of the completed application.**

**Photographs of the scholarship recipient will be used for press releases, the center's newsletter, and the annual report to announce the awarded scholarship. The attached release also gives permission for The Dubin Center to use the scholarship winner's name and photograph for other purposes to raise awareness about the scholarship program.**





**Dubin Center Scholarship**  
**Letter of Recommendation**

Please scan and email letter of recommendation to [info@dubincenter.com](mailto:info@dubincenter.com) with the subject line being the word “scholarship” followed by last name and the first initial of the student applicant by 03/31/2022.

**Applicant (student’s) Name:**

**Your Name:**

**Telephone Number:**

**Address:**

**Relationship to Applicant:**

**Length of Time you Have Known Applicant:**

**Please explain why you believe this student should be considered for a scholarship from our organization. If possible, please give us your impression of the student’s interaction with a family member or friend who has Alzheimer’s disease or another dementia and how the experience has impacted the applicant’s life.**

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**Signature**

**Date**

**The Dubin Center**  
**Scholarship Letter of Recommendation**

Please scan and email letter of recommendation to [info@dubincenter.com](mailto:info@dubincenter.com) with the subject line being the last name and the first initial of the student applicant by 03/31/2022.

**Applicant (student's) Name:**

**Your Name:**

**Telephone Number:**

**Address:**

**Relationship to Applicant:**

**Length of Time you Have Known Applicant:**

**Please explain why you believe this student should be considered for a scholarship from our organization. If possible, please give us your impression of the student's interaction with a family member or friend who has Alzheimer's disease or another dementia and how the experience has impacted the applicant's life.**

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**Signature**

**Date**

## **Supplemental Video Guidelines**

**Create a video that showcases your experience of caring for, helping, volunteering with, etc. a person with dementia and/or your knowledge about the disease. Utilize YouTube, Tik Tok, or another video app/website.**

- 1. Videos must be emailed to [info@dubincenter.com](mailto:info@dubincenter.com) no later than 03/31/2022 with the rest of the completed application with the subject line being the word “scholarship” followed by the last name and first initial of the student applicant.**
- 2. Videos must be no longer than three minutes**
- 3. Video entries must not be derogatory, offensive, threatening, defamatory, disparaging and libelous or contain any content that is inappropriate, indecent, profane, impolite, slanderous or discriminatory in any way.**
- 4. It must not contain content, material or any element that displays any third-party advertising, slogan, logo, trademark or otherwise indicates a sponsorship or endorsement by a third party.**
- 5. It must be an original, unpublished work that does not contain, incorporate, or otherwise use any content, music, material, or element that is owned by a third party or entity. Failing to provide proper documentation or permission to use such materials will result in the entry being disqualified.**
- 6. Video must display the applicant’s experience with dementia and/or their knowledge about the disease.**