



Director Scholarship Referral Form

The Program Director or TRIO Staff member may complete one referral form per applicant. All information to be verified by a Director's signature. Students may be considered for multiple scholarships; however, **programs are limited to 6 applicants per program.**

Student Name:

Nominator's Name:

TRIO Program:

Location:

Please check the scholarship(s) this student will be considered for:

<input type="checkbox"/>	IN TRIO Board Of Directors Full Time
<input type="checkbox"/>	IN TRIO Board Of Directors Part Time
<input type="checkbox"/>	Cheryl Berry Memorial Scholarship
<input type="checkbox"/>	IN TRIO Pre-College
<input type="checkbox"/>	IN TRIO Textbook
<input type="checkbox"/>	Melida Chen Memorial Scholarship

Please rate the student on the following and provide a short narrative or example(s) to support your rating.

A. Student's commitment to excellence in carrying out the ideals of TRIO.

(5) Very Strong (4) Strong (3) Average (2) Below Average (1) Weak

Supporting statements/examples

B. Abilities, potential, and character of the applicant:

(5) Very Strong (4) Strong (3) Average (2) Below Average (1) Weak

Supporting statements/examples (next page)

C. TRIO student's leadership skills & abilities:

(5) Very Strong (4) Strong (3) Average (2) Below Average (1) Weak

Supporting statements/examples

D. An indication of educational and/or financial barriers student has experienced or overcome:

(5) Very Strong (4) Strong (3) Average (2) Below Average (1) Weak

Supporting statements/examples

Packet Checklist for Submission:

- ☐ One completed Director's Referral Form per student.
- ☐ Student completed scholarship form.
- ☐ Student essay - no more than 2 pages double spaced.
- ☐ Applicant's unofficial college transcript, high school transcript or GED scores.

If pre-college also include:

- ☐ Current high school schedule.
- ☐ Letter of acceptance to the college or university they choose to attend Fall 2024.

I affirm the information provided by me and contained within this Scholarship Referral Form is correct and accurate. I understand that any misrepresentation on this form will disqualify the student from consideration for an Indiana TRIO Scholarship. My signature below certifies my voluntary submission of this form.

Signature: _____ Date: _____

Program Director should go to <https://indianatrio.org/scholarships> to complete an application and scholarship submission. The last question on the submission page has a place to upload all submission materials.