



## Gulf Coast Down Syndrome Society's (GCDSS) Family Education Scholarship Program

The purpose of the Gulf Coast Down Syndrome Society's Family Education Scholarship Program is to offer financial assistance to parents or guardians of individuals with Down syndrome who want to attend a conference or other learning opportunity related to Down syndrome. GCDSS encourages you to apply for the scholarship if you are thinking about attending an event during the calendar year. The award will not be distributed until you actually register.

### *Eligibility Criteria*

- Be the parent or guardian of an individual with Down syndrome
- Live in the Gulf Coast Down Syndrome Society's service area, **and**
- Show their intentions to attend a conference or other learning opportunity related to Down syndrome

### *Scholarships*

- A minimum of \$1,000 will be awarded annually, and will be divided equally among all eligible applicants.
- The awarded funds may be used to pay for the registration, transportation, hotel accommodations and/or other related supplies.
- In order for the funds to be disbursed, proper documentation (e.g. receipts, bills) will need to be submitted.

### *Award and Distribution of Funds*

- Recipients will be notified in writing if you are eligible for the scholarship. We will notify you of the amount of the scholarship at that time. With proper documentation, GCDSS can either send funds to the conference organizer or can reimburse you for costs you paid out of pocket. You must submit bills and/or receipts that you are requesting to be funded by GCDSS or reimbursed for. GCDSS will not be responsible for any expenses exceeding the amount of the scholarship awarded.

### *How to Apply*

All applications for the Gulf Coast Down Syndrome Society's Family Education Scholarship **must be postmarked and mailed to GCDSS, P.O. Box 654, Gautier, MS 39553, or emailed to [info@gcdss.org](mailto:info@gcdss.org), with "Scholarship Application" in the subject line to be considered.**

Should you have questions on completing the application, please e-mail [info@gcdss.org](mailto:info@gcdss.org) and we will be glad to help you.

Sincerely,  
Gulf Coast Down Syndrome Society (GCDSS)

**APPLICATION**  
**GCDSS Family Education Scholarship Program**

Name of Applicant: \_\_\_\_\_

Name of Individual with Down syndrome: \_\_\_\_\_

Relationship to: \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

eMail: \_\_\_\_\_

Describe the conference or learning opportunity for which you are seeking scholarship funds. If available, attach documents describing the program and/or registration brochure. Please use additional Pages if necessary.

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

Provide the total cost of the conference or learning opportunity for which you are seeking funding. Please attach documentation of the costs.

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

Please briefly explain why you want to attend and/or what benefit you hope to get out of attending the conference:

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

I understand that if I am awarded this scholarship, I am agreeing to attend the conference or educational event, and that I will need to provide documentation as to how and where the funds will be spent. I also understand that GCDSS will not be responsible for any expenses exceeding the amount of scholarship awarded.

\*Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

\* If you are submitting this form electronically, typing your name in both spaces above is your agreement to the statement and is binding like your handwritten signature.