



Virginia Occupational Therapy Association  
Community. Innovation. Inspiration. Integrity. Service.

## VOTA STUDENT SCHOLARSHIP APPLICATION FORM

**DEADLINE FOR RECEIPT OF APPLICATION – June 3, 2023!**

**Please review criteria for student scholarships disseminated with this form. Questions or requests for additional forms can be directed to Justin DeMarchi via e-mail:**

[Scholarships.awards.vota@gmail.com](mailto:Scholarships.awards.vota@gmail.com) with the subject line “VOTA Scholarship”.

**Applications must be delivered electronically to [Scholarships.awards.vota@gmail.com](mailto:Scholarships.awards.vota@gmail.com) with the subject line “VOTA Scholarship”.**

**You will receive an e-mail acknowledging the receipt of your application.** \*\*Please note, your application will not be considered until receipt of the faculty endorsement form and accompanied by a faculty letter of support/letter of recommendation, which must be submitted by a faculty member by the deadline listed above.

### Required Components:

- Completed Student Scholarship Application Form/2-3-page essay
- Faculty Endorsement Form submitted by faculty member
- Faculty letter of support/recommendation (up to two letters will be considered)

### Part I

<b>Applicant Name:</b>	<b>Date:</b>
<b>Phone &amp; E-mail:</b>	<b>Address:</b>
<b>Degree Program (i.e. OT, OTA):</b>	<b>College/University:</b>
<b>Current GPA:</b>	<b># Years VOTA Member:</b>
<b>Applying for: <input type="checkbox"/> OT Graduate Scholarship <input type="checkbox"/> OTA Scholarship</b>	<b><input type="checkbox"/> Please also consider me for the Barbara Howard Scholarship open to both OT and OTA students.</b>

**Part II- Please attach a 2-3-page essay which addresses the following questions related to your current role as an OT student and your professional potential as an OTR or OTA.**

- Why did you choose OT?
- What Community/Volunteer Activities have you participated in during your time as an OT student?
- Please describe any Leadership Experience you have, specifically experience that has occurred during your time in the OT/OTA program.
- What Extracurricular Activities have you been involved in?
- What Personal Qualities do you possess that make you a good candidate for this award?

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- f) What has been your role in professional organizations such as VOTA, AOTA or SOTA?
- g) What are your goals as a future OT/OTA?
- h) Do you have Financial Need that you wish us to consider in reviewing your application?