Current full-time students (Online or Chicago Campus) are invited to apply for the 2015-2016 Seymour Schneider Scholarship. This scholarship was established in memory of Dr. Seymour Schneider, who taught at Adler University until his death in 1996. Scholarships recipients will be selected based on an essay, using the following criteria, in addition to other requirements outlined below.

**Award Amount and Requirements**

One scholarship will be awarded in the amount of $5,000. The award will be disbursed toward tuition and fees over two terms (Fall 2015 and Spring 2016). Scholarship recipients may be required to attend a scholarship reception. Students must maintain Satisfactory Academic Progress and be enrolled Full-Time in order to maintain eligibility for allocations of their award.

**Application Instructions and Deadline**

To be considered for this scholarship, students should submit this application and an attached essay by 5:00 p.m. on Monday, June 15, 2015 to financialaid@adler.edu. PLEASE NOTE: This is a firm deadline that will not be extended. Scholarship winners will be announced and notified July 31, 2015.

**General Scholarship Application Criteria**

1. Applicants must have a cumulative GPA of at least 3.0 and have completed at least one semester at Adler University (Online or Chicago Campus) at the time of application deadline.
2. Applicants must be full-time students for the terms they are awarded the scholarship.

**Essay Criteria**

1. Format
   a. Approximately 500 words or 1 page doubled-space
   b. APA formatting (margins, font size and style)
   c. Grammar

2. Topic
   a. How will Adlerian training influence your current and future role as a practitioner while addressing social issues in the community?
      i. Adlerian training experiences (courses, practicum, student organizations, faculty collaborations, etc.)
      ii. Description of your role as a practitioner (link your training to your current and future professional roles)
      iii. Address social issues in the community

**Contact Information**

Name: ___________________________________________ Student ID: ________________________

Phone #: ___________________________ Email: __________________________________________________________________

Degree Program: ___________________________ Starting Term: ___________________________

I certify that the above information is true and grant all members of the scholarship committee access to my Adler University transcript for review.

Signature: ___________________________ Date: ___________________________

You may submit the application via email, fax, or hand deliver to the Office of Financial Aid. Email: financialaid@adler.edu Fax: 312-662-4197 Mail: 17 N. Dearborn, Chicago, IL 60602