



TEAM TYPE 1 FOUNDATION SCHOLARSHIP APPLICATION

Team Type 1 was established with the mission to “instill hope and inspiration for people around the world affected by diabetes.”

We are Team Type 1. We fight for the RIGHT TO LIVE through a global mission of education, empowerment and equal access to medicine for everyone affected by diabetes.

As the only foundation providing college scholarships exclusively to athletes with Type 1 diabetes who play NCAA/NAIA sports, Team Type 1 is accepting applications from qualified students who have Type 1 diabetes and meet other eligibility requirements as outlined below.

PURPOSE

Team Type 1 is funding scholarships in order to recognize young, talented athletes with Type 1 diabetes who demonstrate an ability to balance both academic and sporting commitments, athletes who want to use their sport to educate, empower and inspire, and support families already burdened with additional expenses associated with diabetes care. Our goal is to develop the next generation of leaders who will stand and fight for people with diabetes around the world.

Scholarship awardees will receive: the scholarship annually paid each year directly to the university during the term of their undergraduate or graduate work, as long as other Team Type 1 scholarship criteria are met.

The selection process for applications is based on following criteria:

- The applicant has Type 1 diabetes
- The applicant maintains a GPA of 3.0 or better
- The applicant wants to use their sports as a platform to inspire
- The applicant attends (or will attend) an accredited NCAA/NAIA institution
- The applicant continues or will compete in an NCAA/NAIA sport
- The applicant commits to being available for at least two Team Type 1 speaking opportunities (at diabetes camps, conferences, or other events) to raise awareness about diabetes management and to inspire people with diabetes to better manage their disease.¹

Applications, along with a photo and two written reference relating to your sport (i.e., from a coach, manager or professor) should be mailed to **Amber Medley** at **2144 Hills Ave. Suite A, Atlanta, GA 30318** or e-mailed by pdf attachment to amber@teamtype1.org.

1. Travel expenses are covered for all speaking events, and scholarship winners will have the opportunity to attend speaker training.



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Selection process: The Team Type 1 Scholarship Committee will review all applications and will recommend a list of winners to the Team Type 1 Board of Directors for their approval.

The submission deadline is third week of February and winners will be announced end of June. Applicants are encouraged to be submitting at any time prior to the deadline.

BIOGRAPHICAL AND CONTACT INFORMATION:

Name:

Date of Birth: Male: Female:

Parent/Guardian:

Parent/Guardian Phone:

Parent/Guardian Email:

University/College Student ID: Citizen of:

Permanent Mailing Address:

Applicant Contact Phone:

Applicant Email:

ACADEMIC INFORMATION:

High school:

Location (City/State):

Current Grade Point Average (GPA): Other Scale:

University/College attending (or planning to attend):

Address and Phone # where to send the scholarship check. Please check with your school:

The next school year, I will be a: High School University/College
 Freshman Sophomore Junior Senior



Please describe your athletic goals for next three years:

Please describe your academic goals:

Please describe your community service activities:

ESSAYS:

How will this Scholarship benefit you?

Why do you believe you are the best candidate for this scholarship?



DIABETES INFO:

How many years have you had Type 1 diabetes?

What is your latest HbA1c (include the units):

What do you remember most from when you were diagnosed with Type 1 diabetes?

Please describe your nutrition plan:

OTHER INFO:

Provide details of any financial support you are receiving from any other organization (including your college/university):

What is your household gross annual income?

PARENT/GUARDIAN & APPLICATION SIGNATURE:

By signing bellow I certify that I understand the criteria for the scholarship and submission deadline for the application form.

I hereby authorize the reviews of all aspects of this application and I acknowledge that the information provided herein is true and correct.

Applicant's Signature:

Date:

Parent/Guardian Signature (*if applicant is under 18*)

Date: