



**Susana Viera
MS Foundation**

The Susana Viera Multiple Sclerosis Foundation, Inc. Scholarship

\$500.00 scholarships will be awarded to six seniors graduating in 2019 who are currently attending a high school in the city/towns of New Bedford, Dighton, Rochester, Dartmouth, Westport, Fall River, Freetown, Lakeville and Fairhaven

The Susana Viera Multiple Sclerosis Foundation was co-founded by Susana P. Viera, a bilingual Nurse Practitioner, who was diagnosed with Multiple Sclerosis in 2010. One year later she along with a group of dedicated family, friends and health care professionals founded the organization. Its mission is to educate and provide support and health care services to the English and Portuguese speaking communities of Southeastern Massachusetts affected by Multiple Sclerosis and other neurological diseases. Through a number of annual fundraising events we are able to support the National MS Society New England Chapter MS Walk Dartmouth, support students interested in using their degrees to help those living with MS via this scholarship fund, and fund a voucher transportation program for those living with MS to increase socialization and independence. We encourage you to apply if you meet the following criteria:

- **This application must contain accurate and detailed information; and must be accompanied by an official transcript of Scholastic Record.**
- **Eligibility requirements: Any graduating senior who is seeking an undergraduate degree from an accredited college or university (Engineering, Computer Science, Medical/Nursing, or Social Services Field).**
- **Include a copy of your acceptance letter from an accredited college or university. If you have not received your letter, you will be required to submit it prior to the release of the scholarship check if you are chosen as a recipient of the scholarship.**
- **Include a typed essay of 250 words or less on how your field of study will be beneficial to people who have Multiple Sclerosis or beneficial to those who have loved ones affected by the disease.**

You may apply by mail, via email attachment to info@susanavieramsfoundation.org or online at www.susanavieramsfoundation.org. You can also print the hard copy application from the web site.

Scholarship applications must be **RECEIVED** by **March 16, 2019**. Only complete applications with all required attachments will be considered. Please allow ample time if you are submitting via postal service.

Winners will be notified by **March 27, 2019** and will be invited to receive their award at the *Annual Susana Viera Multiple Sclerosis Foundation Fundraiser Dinner* on April 5, 2019 at the Century House, Acushnet. Any questions, please do not hesitate to contact us at info@susanavieramsfoundation.org



**Susana Viera
MS Foundation**

SCHOLARSHIP APPLICATION 2019

*****APPLICATION AND REQUIRED DOCUMENTATION MUST BE RECEIVED NO LATER THAN MARCH 16, 2019. PLEASE ALLOW AMPLE TIME FOR POSTAL DELIVERY IF MAILED.*****

APPLICANT'S INFORMATION (Please print clearly)

Name in full: _____ Home number: _____

Home address: _____ Cell number: _____

E-mail address: _____

FAMILY INFORMATION

Father/Guardian: _____

Address: _____

Telephone: _____ Email: _____

Mother/Guardian: _____

Address: _____

Telephone: _____ Email: _____

COLLEGE INFORMATION

First Choice: _____

Have you been accepted? Yes No

Second Choice: _____

Have you been accepted? Yes No

Declared Major/Minor:



Susana Viera MS Foundation

PLEASE DESCRIBE/LIST EXTRA-CURRICULAR ACTIVITIES:

ESSAY: Submit a typed essay, 250 words or less, describing how your career objectives/field of study will be beneficial to people who have Multiple Sclerosis or beneficial to those who have loved ones affected by the disease. **Attach to this application.**

RECOMMENDATIONS: Please enclose TWO letters of recommendation from your guidance counselor or a teacher of a major subject.

COLLEGE ACCEPTANCE LETTER: Include a copy of your acceptance letter to an accredited college or university with your application. If you have not received your letter, you will be required to submit it prior to the release of the scholarship check if you are chosen as a recipient of the scholarship.

TRANSCRIPT: An official copy of your scholastic transcript must be included.

TO BE COMPLETED BY GUIDANCE COUNSELOR

SAT SCORES Verbal (writing) _____ Math _____ Total _____

Signature of Guidance Counselor: _____

SIGNATURES

Applicant: _____ Date: _____

Parent/Guardian: _____ Date: _____

PLEASE SUBMIT COMPLETED APPLICATION BY MARCH 16, 2019 via:

- Email as an attachment: info@susanavieramsfoundation.org
- Online via website: www.susanavieramsfoundation.org
- Mail: The Susana Viera Multiple Sclerosis Foundation, Inc., P.O. Box 70764, Dartmouth, MA 02747

RECIPIENTS WILL BE NOTIFIED BY MARCH 27, 2019