



MARYLAND

Maryland Creative Problem Solvers, Inc. Scholarship Application

To the Applicant:

Maryland Creative Problem Solvers (MCPSI) is offering several scholarships to high school seniors who have been active in the Destination Imagination. Scholarships will be awarded based on a funds available basis and according to criteria established by the MCPSI Scholarship Committee. Heavy consideration will be given to the depth of the applicant's DI participation and the essay. Scholarship winners will be announced at the State Tournament Awards Ceremony.

How to apply:

The applicant should print and complete this application, obtaining references as indicated. The application should be mailed to MCPSI, P. O. Box 9852, Baltimore, MD 21284. It must be postmarked by March 1st.

Applicant Information

Name _____

Address _____

Telephone Number _____

E-mail address _____

Name of High School _____

Maryland DI Region of participation _____

Intended course of college study _____

College to be attended, if known _____

References to be submitted by:

1- Name _____ E-mail _____

2- Name _____ E-mail _____

Mail this application to: MCPSI, P.O. Box 9852, Baltimore, MD 21284

Applicant Name _____

Destination Imagination Experience

Please list your various DI experiences below.

Teams I've been on:

School or Membership Name	Challenge	Level	Team Manager Name	Team Manager Phone Number

Volunteer duties I have performed for DI:

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

Applicant Name _____

Destination Imagination takes its participants on a great adventure of the mind and spirit. Tell us what you have gained from the DI experience and how it will serve you as you begin the next adventure in college and beyond. Please limit your response to 500 words. You may attach a separate page for this response.

[illegible]

References**Applicant Name** _____

Please submit two references from team managers, principals, teachers, regional directors, etc. that can verify your DI involvement. Print this form two times and give one copy to each referencing individual. The individuals should mail the references directly to the address at the bottom of the form by March 1st.

Name of responding individual _____

Telephone number _____ E-mail address _____

What was your DI involvement with the applicant (please give specific dates, challenges, school names, etc)? Use the back of this page, if necessary.

How did the applicant contribute to the team or the volunteer activity to which you speak?

What unique qualities or experiences set this applicant apart from others?

Reference's signature _____

Please mail this form by March 1st directly to:
MCPSI, P. O. Box 9852, Baltimore, MD 21284