

**Fiorello H. LaGuardia Community College
Division of Adult and Continuing Education
Program for Deaf Adults**

**2019 THOMAS SAMUELS SCHOLARSHIP AWARD FOR DEGREE
STUDENTS**

The LaGuardia Community College Program for Deaf Adults (LAGCC/PDA) invites students to apply for the Thomas Samuels Scholarship. Thomas Samuels served PDA for 14 years as its assistant director, media specialist, lab technician and program newsletter creator. To honor him, we plan to offer a \$500 scholarship to a student in recognition of his/her academic achievement, character and motivation.

ELIGIBILITY REQUIREMENTS:

- Deaf/Hard-of-Hearing students enrolled in the LaGuardia Academic Program and registered with Program for Deaf Adults;
- Minimum cumulative GPA of 2.5
- Involvement in college or community activities
- Completion of two years of approved courses at LaGuardia with a minimum of 27 credits as of June 30, 2019 and continuing at LaGuardia, **or** completion of course requirements for graduation by June 30, 2019 and planning to continue to a 4- year college (Priority will be given to continuing students)
- Not a previous recipient of the Thomas Samuels Scholarship

APPLICATION PROCESS:

1. Complete the application form.
2. Request the Registrar's Office to forward your transcript to: Sue Livingston in B234#E. (There is no fee for this service.)
3. Submit a one-page (typed) essay, selecting one topic from the two listed on page 3.
4. Request a letter of recommendation (use enclosed request form) from either an academic faculty member or community leader (from a church or other organization you belong to) who will verify your college or community activities. Fill in your portion of this form and give it to the person you select.
5. Submit application form and essay to:
Sue Livingston, Chair
Thomas Samuels Scholarship Committee
LaGuardia Community College
31-10 Thomson Avenue/Room B 234#E
Long Island City, NY 11101
6. **Deadline to submit application material is May 31, 2019.** The recipient's name will be announced by June 30th.

FOR MORE INFORMATION CONTACT:

Kim Lucas (917) 832-1203 vp (kimluc@lagcc.cuny.edu)
Sue Livingston (718) 482-5621 v (slivings@lagcc.cuny.edu)

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**2019 THOMAS SAMUELS SCHOLARSHIP AWARD
APPLICATION FORM FOR DEGREE STUDENTS
PLEASE TYPE OR PRINT CLEARLY**

NAME _____ DATE _____

MAJOR _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE: Home _____ (. VP . Voice)

E-MAIL: _____

DATE ENTERED LAGUARDIA: _____

CREDITS EARNED AS OF JUNE 2019: _____

SESSION AND YEAR YOU EXPECT TO GRADUATE: _____

NAME AND AFFILIATION OF PERSON WRITING A LETTER OF RECOMMENDATION:

NAME

DEPARTMENT OR ORGANIZATION

LIST ANY COLLEGE OR COMMUNITY ACTIVITIES YOU ARE INVOLVED IN:

1. _____

2. _____

3. _____

ESSAY TOPICS

Select one topic from the two listed below, and write a one-page typewritten essay.

(A)

Suppose you were made president of LaGuardia Community College. What would you change at the College to make the learning better for all students? What kind of teachers would you hire? How would you improve the technology to help students learn better? Would you keep the 12-6-12-6 sessions? In a type-written essay of 300 words, explain what you would do as president to improve the academic experiences for all students.

(B)

Pick an experience from your own life and explain how it has influenced your development. Was it a place that you traveled to that opened up our mind in a new way? Was it returning to your home country that made you think differently about your goals in life? Was it a movie that you saw or what a friend or parent said or just an observation that made you think differently about your life? In a type-written essay of 300 words, explain how that experience took your life in a new direction.

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**2019 THOMAS SAMUELS SCHOLARSHIP
LETTER OF RECOMMENDATION REQUEST FOR DEGREE STUDENTS**

The student noted below is applying for the 2019 Thomas Samuels Scholarship, which is awarded by LaGuardia Community College, Program for Deaf Adults (PDA). This student would like you to support her/his application with a letter of recommendation attesting to her/his academic abilities, character, motivation and initiative.

In an e-mail to Professor Sue Livingston (slivings@lagcc.cuny.edu), please explain why you think this student would be a deserving recipient of the Thomas Samuels Scholarship. Please include how long you have known the applicant, what courses you might have taught her/him and/or what activities you may have worked on with the applicant. The deadline for the competition is May 26, 2019.

To Be Completed by Applicant:

NAME _____
Please Print

E-MAIL _____

I hereby waive my right to review this recommendation.

Applicant's signature _____

HELPFUL TIMELINE

MARCH-APRIL

1. Fill out the application, adding the name of a teacher/community member who will write you a letter of recommendation.
2. Explain to the teacher/community member that you are applying for the Thomas Samuels Scholarship. Give the Letter of Recommendation Request (p. 4) to the teacher and ask that he/she emails the recommendation to Sue Livingston (slivings@lagcc.cuny.edu). You can sign your name where it says Applicant's Signature. It means you will not need to see the email that he/she writes.
3. Go to the Registrar's Office (C102) and ask that they send Sue Livingston (B234 #E) a copy of your transcript.

WEEK OF MAY 6

4. Write an outline and draft of your essay.
5. Check with Sue to make sure that she has received your transcript. Also ask if she has received a letter or recommendation. If not, remind your teacher/community member to email it to Sue.

WEEK OF MAY 13

6. Write the final draft of your essay and ask a friend or tutor for editing help.

WEEK OF MAY 20

7. Turn in your application and essay to Sue in B234 #E

Easy . . . !!!!!

