

# 9th Annual Walter Ely Memorial Scholarship



Walter was a very special soul who was born and raised in Lamar 1951—2010. He walked the streets of Lamar collecting recyclable aluminum cans. Though he was non-verbal; he knew no stranger. When he saw you he would always run up, give you a hug, and place his head against you to show how special you were to him. He was known to stop by each business and many homes along his daily route; just to say hello. The smile on his face would make your entire day! He was a special friend to many... in his own way!

*If everyone was a little bit more like Walter the world would be a much nicer place.*

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Southeastern Developmental Services Inc. is honored to be awarding a **\$1,000.00** scholarship in memory of Walter Ely. SDS encourages all individuals who wish to further their education in the fields of Human Services or Education with an emphasis in Special Education to apply. Priority will be given to those who document a connection to someone with an intellectual and/or developmental disability or a love for recycling.

⇒ Applications can be picked up at 1111 South 4th Street in Lamar  
or can be found on the SDS website at [www.sdscsb.org](http://www.sdscsb.org)

Completed applications:

- ⇒ Electronic submissions will be accepted via email at [dharbour@sdscsb.com](mailto:dharbour@sdscsb.com)
- ⇒ Hand delivered submissions will be accepted at 1111 South 4th Street in Lamar
- ⇒ Mail submissions to  
SDS Board of Directors  
P.O. Box 328  
Lamar, CO 81052
- ⇒ Deadline for scholarship applications is **Monday, April 8, 2019 at 12 noon**

\* If selected as the Walter Ely Scholarship recipient we would encourage you to give back to the Intellectual and Developmental Disability Community

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Southeastern Developmental Services Inc.  
P.O. Box 328  
1111 South 4th Street  
Lamar, CO 81052

Please see the announcement for more details, and deadline.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Cell Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Address: \_\_\_\_\_

## ACADEMIC INFORMATION

I am currently a student: Yes No

If yes, mark one: High School College Graduate Post-Graduate

Name of Current School/College: \_\_\_\_\_ Current GPA: \_\_\_\_\_

Estimated Grad Date or Year in School: \_\_\_\_\_ Field of Study: \_\_\_\_\_

List any academic honors, awards, club memberships, hobbies, outside interests, extracurricular activities, volunteer activities in the community etc: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(attach an additional sheet if necessary)

## TO BE CONSIDERED, ANSWER THE BELOW QUESTIONS ON A SEPARATE SHEET OF PAPER

In 200 words or less per question

1. What are your career or education goals?
2. What experience do you have with someone that is intellectually and/or developmentally disabled?
3. Describe your financial need and any additional information you would like to share.

## STATEMENT OF ACCURACY

I hereby affirm that all the stated information provided by me is true and correct to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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