



Capital Region Creative Problem Solving Organization is proud to announce that this 2012 Tournament Season we are offering a scholarship for graduating seniors pursuing a post High School degree in a Trade School, Community College or University. The scholarships will range in amounts from \$250-\$500 per award which will be paid directly to the education institution that the winner will attend and is for one year.

The total number of scholarships and the exact amount of each will be determined after identifying the number of qualified applicants.

Applicants must:

- Currently reside in or attend a school in the Capital CPSO geographical Region
- Have participated for a minimum of 3 years in a Creative Problem Solving Organization with at least 1 year in Destination ImagiNation. At least one year of participation must have been at the High School level.
- Currently be a senior in high school and planning to attend a post secondary educational institution or four year college.

Application must be postmarked by February 1, 2012 and received by February 4, 2012.

Submit 3 copies of your Application and related material to:

Capital Region CPSO
Attention: Scholarship Committee
PO Box 202674
Austin , TX 78720

Scholarship winner will be announced at the Capital Region CPSO Tournament.

All personal information provided in this application will be kept confidential by the scholarship committee. Scholarship Scores will not be released, nor will materials be returned. Decisions are final and not open for appeal.

We encourage you to consider applying for scholarships awarded by Texas Creative Problem Solving Organization found at <http://texasdi.org/scholarships> and also DISC– the Destination Imagination Support Committee found at www.idodi.org/disc

Best of luck in this and your future creative endeavors!

Capital Region CPSO Scholarship Application 2012

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Name:

(Last) (First) (Middle)

Home Address:

(City) (State) (Zip)

Email: _____ Birth Date: _____

Phone number: _____

High School: _____

High School Address: _____

(City) (State) (Zip)

High School Phone Number _____ GPA _____

Scale Used (4, 5 or 10 point)

List three Colleges, Universities or Trade Schools you have applied to:

1. Extracurricular Activities

List other extracurricular and volunteer activities in which you have participated during High School. (attach additional sheet if necessary)

Year(s)	Activity
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2. Creative Problem Solving Involvement

Number of years of participation in Creative Problem Solving _____

Please specify your Destination ImagiNation involvement this year.

List Team Challenges or Problems that you have participated in over the years

Year	Challenge/Problem & Program	Placement/ Advancement	Special Awards Received & Reason
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List any additional Creative Problem Solving Participation

(Workshop volunteer, Appraising, Assistant Team Manager, Volunteer at tournament...)

Year	Description of participation and which Creative Problem Solving organization City and State
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_____	_____
_____	_____
_____	_____

What have you done to inspire others to participate in Destination ImagiNation or other creative problem solving endeavors?

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3. Personal Reflection

In a creative manner, present how the skills you have gained from Destination ImagiNation have helped you be successful in a personal or school project/activity. If providing your reflection in print, please limit it to two pages, single sided. If audio/visual, please limit it to 8 minutes maximum length and must be provided on a CD and specify program used to produce it.

4. Letters of Recommendation

Please use the forms provided to include two Letters of Recommendation from the following:

- 1) Your current or past Team Manager or other adult volunteer in Destination ImagiNation.
- 2) A school administrator, teacher or community representative. Use the form provided.

5. Other Information

Applicants may list other information they would like the scholarship committee to consider. This could include things such as : financial need, family situation, special recognition or awards received or any other information you would like to share.

6. Affirmation and Acknowledgement

I affirm that the information I have provided in this application is true and correct to the best of my knowledge. I also acknowledge and agree that, should my application be approved and I receive the Capital Region CPSO scholarships, Capital Region CPSO may use the information contained in this application for promotional or workshop training purposes without further compensation or notification. I understand that Scholarship Scores will not be released, nor will materials be returned. Decisions are final and not open for appeal. If I am under 18 years of age at the time of signing, a parent or guardian will witness my signature, then affix his/her own name and signature below. Only hand-signed applications will be considered.

(Applicant Signature)

(Parent/Guardian Signature)

(Applicant Name Printed)

(Parent/Guardian Name Printed)

(Date Signed)

(Date Signed)

Capital Region CPSO Scholarship
Letter of Recommendation Form
From School or Community Involvement

Student Name _____

School _____

The above named student has applied for a Capital Region Creative Problem Solving Organization Scholarship. This opportunity is open to those graduating seniors who have been actively involved in Creative Problem Solving competitions throughout their school years. The evaluation committee for these awards is interested in learning about the student's non-Creative Problem Solving Competition activities and other attributes. On this page, or another attached sheet, please offer a brief statement (approximately 100 words) about this student.

Please mail it to:
Capital Region CPSO
Attention: Scholarship Committee
PO Box 202674
Austin , TX 78720

Entries must be postmarked by February 1, 2012 and received by February 4, 2012.

Referral From : _____

Organization _____

Position _____

Email _____ Phone _____

Years you have known this student _____

Activities through which you have known this student _____

Your Statement of Recommendation:

Capital Region CPSO Scholarship
Letter of Recommendation Form

Team Manager or other adult volunteer in Destination ImagiNation

Student Name _____

School _____

The above named student has applied for a Capital Region Creative Problem Solving Organization Scholarship. This opportunity is open to those graduating seniors who have been actively involved in Creative Problem Solving competitions throughout their school years. On this page, or another attached sheet, please offer a brief statement (approximately 100 words) about this student's Creative Problem Solving activities.

Please mail it to:
Capital Region CPSO
Attention: Scholarship Committee
PO Box 202674
Austin , TX 78720

Entries must be postmarked by February 1, 2012 and received by February 4, 2012

Referral From : _____

Email _____ Phone _____

Years you have known this student _____

Years you have served as a team manager for this student's CPS activities _____

Your Statement of Recommendation: