



Sue Scott Scholarship Application

Name: _____

Mailing Address: _____

Phone (Home): _____ (Work) _____

Social Security Number _____ Email Address: _____

Have you passed the RID Generalist Written Test? Yes _____ No _____

If yes, when? _____

Have you passed the NIC Written Test? Yes _____ No _____

If yes, when? _____

RID Member: Yes _____ No _____

If yes, which membership category (circle one): Certified Associate Student

ALRID Member: Yes _____ No _____ If yes, month and year joined _____

Local division: Yes _____ No _____ If yes, which division and year joined _____

Other memberships: _____

Honors and Awards: _____

Which RID Test do you plan to take? CI _____ CT _____ NIC Written Test _____

NIC Performance _____ CDI Performance _____ CDI Written _____

Where and when do you plan to take this test? _____

Include:

1. This form
2. Resume
3. Your philosophy on interpreting along and your future plans.
4. Proof of passing the RID Generalist Written Test if taking a performance test.
5. Three letters of recommendation.

Send to:

Melvin A. Walker, PDC Chair
ADRS
3000 Johnson Rd.
Huntsville, AL 35805