The Ophthalmic Photographers' Society's Johnny Justice Jr. Scholarship Award

Guidelines for Potential Applicants

Purpose:

To ensure that applicants for the Johnny Justice Jr. Scholarship Award, (JJJSA) understand the types of educational opportunities to which the scholarship may be applied.

I. Policy Statements

- A. Proceeds from the OPS JJJSA are restricted to funding photographic educational programs. Funding is through grants as defined below.
- B. Funds from the OPS JJJSA may be used in support of:
 - 1. Ophthalmic photographers attending any photographic courses, workshops or meetings related to ophthalmic imaging.
 - 2. Students enrolled in formal photography programs at recognized institutions of higher learning.
- C. The Board of Directors and/or its nominees have absolute discretion and the final decision concerning the approval of funding from the JJJSA. The scholarship award amount is fixed each year and the award is not guaranteed to cover the full cost of the educational program.

II. Application for Funding

- A. Eligibility:
 - 1. Current (dues paid) members of the Ophthalmic Photographers' Society, excepting members of the JJJSA Committee or of the OPS Board of Directors may apply for the JJJSA.
- B. Special Notes on Application Process
 - 1. All applications must be made on the official application form, accompanied by supporting documentation.
 - 2. By signing the application form the applicant gives the JJJSA committee express permission to investigate and verify all submitted information.
 - 3. The candidate must agree to provide the JJJSA Committee with any information it may require to properly evaluate applications for funding.
 - 4. The JJJSA recipient must provide the OPS with their social security number for tax purposes.
- C. Applications must include the following:
 - 1. The applicant's current resume
 - 2. A written statement of the applicant's aspirations within the field of ophthalmic photography and the intended use for the scholarship.
 - 3. A copy of the proposed course/program description.
 - *See checklist on final page for special required information for students*

OPHTHALMIC PHOTOGRAPHERS' SOCIETY JOHNNY JUSTICE JR. SCHOLARSHIP AWARD

APPLICATION FORM

Please read the "Guidelines for Potential Applicants" before completing this form

Name:		OPS Member	rship #	:			
Address:							
City:	State	:	Zip C	ode: _			
Phone: ()		Date of Birth	:			_/	
	Empl	oyment					
Name:							
Address:			City:				
State: Zip	Code: _	P	hone:	()			
Position:		Date Appoi	nted:		' ———		
Supervisor:							
If you have been in your present appointme	ent less than	five years, please	give deta	ails of yo	ur pre	evious e	mployment
Which course are your planning to at	tend?						
When do you need the funding?							
Total cost of proposed program? (An	ı estimate	is acceptable	if tota	l fundiı	ng is	s not y	et known)

^{**} A copy of the course/program should accompany this application form is available**

*** A full resume should accompany this application ***

Name:	Name:
Address:	Address:
Phone: ()	Phone: ()

Please give the names and addresses of two references who may be contacted concerning your

Purpose of the funding:

scholarship application:

State clearly what you are requesting the funding for. Provide the fullest possible details of the course you seek to attend, how it will help you in your ophthalmic career, and why you cannot get the funding from another source. Use the "Guidelines for Potential Applicants" to assist you. Attach additional information and pages as necessary.

Financial Information:

Please provide a "best guess" estimation of costs for attending this educational program based on researched tuition fees, travel, lodging and meal costs

Checklist:

	As	incom	olete	informat	ion wil	l delay	your	application	on, please	e do the	following:
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Review the "Guidelines for Potential Applicants"

Attach your full resume

Provide a clear time frame for funding and application to the course

State your educational objectives clearly

Provide a detailed financial estimate of course costs, and the funding needed.

Enclose a copy of the course/program description.

For Students only:

Attach a copy of the applicant's student identification

Attach the applicant's current program curriculum

Attach the applicant/s current enrollment schedule.

Declaration:

I have read the "Guidelines for Potential Applicants," and agree to be bound by any statements and conditions contained therein. To the best of my knowledge the statements made by me in this application form and in all accompanying documents are the truth. I agree to furnish the OPS with all necessary information concerning this application, including a final report on the course determined by the OPS.

Applicant's Signature:	Date:
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