



Wilson Reading System® Level I 2024-2025
University of Utah Reading Clinic, George S. and Dolores Dore Eccles Foundation and
the Crawford Family Foundation Scholarship Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Home Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: _____ Personal Email: _____

Cell Phone: _____ Current Position: _____

School: _____ District: _____

School Address: _____

City Educator School State ZIP Code

School Phone: _____ Educator School Email: _____

Name of Applicant with whom your application is yoked/paired with... (yoking is highly suggested)

Last First

- Option 1:** Observations at the UURC in Murray, UT
 Option 2: Web-based observations
 Option 3: Open to either Option 1 or Option 2
 Site-based (If 6 or more educators from a school or district, observations may be in your district – trainer travel expenses may be applied)

Have you attended a WRS Introductory Workshop within the last 5 years? YES NO Where Attended? _____
 Date? _____

**If you checked the "NO" box above you must register for the 3-day workshop online at www.uurc.org.

Education

Please list
 University Degrees & Certification: _____
 Relevant Educational Experience: _____

References

Please list two professional references.
 Full Name: _____
 Position: _____ Phone: _____

 Full Name: _____
 Position: _____ Phone: _____

In a brief attached, typed essay, please describe why you want to become more skilled at helping students with severe reading difficulties/dyslexia. In particular, please describe how you will apply what you learn in a school setting.