

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Scholarship Committee Name]  
[Organization/Institution Name]  
[Organization Address]  
[City, State, Zip Code]

Dear [Scholarship Committee/Specific Name],  
I hope this letter finds you well. I am writing to apply for the [Name of PWD Scholarship] scholarship designed for persons with disabilities. As a [Your Year of Study, e.g., sophomore] pursuing a degree in [Your Degree Program] at [Your Institution/University Name], this scholarship would greatly assist in covering my educational expenses.

I have been living with [specific disability or condition] which affects my [briefly explain how it impacts your daily life and studies]. Despite these challenges, I am committed to my education and personal growth. I have maintained a [Your GPA or relevant achievements] while being involved in [mention any relevant extracurricular activities, work experience, or volunteer work].

This scholarship would not only alleviate some of the financial burdens I face but also allow me to focus on my studies and continue striving for academic excellence. I am determined to give back to my community by [mention any future goals related to your field or community service]. I am grateful for your consideration of my application. I look forward to the opportunity to contribute positively to my community and the chance to achieve my academic goals with the support of the [Name of PWD Scholarship].

Thank you for your time and support.

Sincerely,  
[Your Name]