SCHOLARSHIP APPLICATION

FORM

Emily Kane Scholarship Chair emily.kane@brf.org



PERSONAL INFORMATION **Full Name** Social Security Number : **Date of Birth** Collected only if a finalist. **Address Zip Code** City Mother or Guardian **Father** Guardian E-Mail Male **Female Telephone** INVOLVEMENT В List the student activities in which you participated during high school. Include offices held and awards received. List other activities in which you participated (community, church, clubs, volunteer work, etc.). Include offices held and awards received. What employment have you had in the last two years or are you planning to have this summer? Yes No May we call the above if we would like a reference?

SCHOLARSHIP APPLICATION

FORM

Name of

High School

Emily Kane Scholarship Chair emily.kane@brf.org

Date



C POSTSECONDARY PLANS	
School/College : Name	
City / State :	Applied? Yes No
What is your current career path or major area of study?	Accepted? Yes No
Add additional comments below or attach a separate sheet if necessary.	
D PARTICIPATION IN TITLE 1 & LETTERS	OF RECOMMENDATION
Attach or upload an essay of 300 words or less. This is an extremely important portion of your application. Essays exceeding 300 wowill not be considered. Essay should include the following:	l atters of
 Why do you wish to further your education? Show a sincere desire to further education for continuous growth 	Attach two or more letters of recommendation.
 Have definite educational goals for yourself. Be clear, concise, neat, and expressive. 	One letter must be from a certified
Number of words in essay	school staff member.
E TITLE 1 PROGRAM PARTICIPATION CERTIFICATION	
Must be completed by a school official.	
I certify that was in a Title 1 program sometime during his/her ea childhood through grade 12 school years.	
Printed Name Signature	
School Position Telephohe	