

SCHOLARSHIP APPLICATION

Please Print:

Student Contact Information					
Applicant's Full Name:					
Address:			_		
City:	State:	Zip:			
Telephone Number:					
High School Information					
High School Name and Location:		Year of Graduation:			
Grade Point Average:	Class Rank:	Number of Students in Class:			
Is your school grading system based upon a maximum of 4.0?					
Yes No Explain:					
College Information					
What college/university do you pla	an to attend?				
Address:					
City:	State:	Zip:			
Have you been accepted by that college?Date Accepted:					

Intended major course of study:

Standardized Tests Have you taken any of the following standardized tests: SAT Score: _____ **ACT** Score: **Financial Information** How do you plan to finance your schooling? Have you received any scholarships? Yes No If you have been awarded scholarships, please list all scholarships, the organization making the grant: Goals and History (Attach additional sheets for any question, if necessary) What are your occupational goals? What are your life goals? List groups to which you have belonged (Youth Groups, 4-H, etc.). Include, at a minimum, the years in during which you participated, your leadership roles in each group (if any), and a brief description of the specific activities in which you were involved.

David was a leader in every aspect of life. He had the unique ability to unite individuals to achieve ommon goals. More importantly, David led by example. He always held himself to the highest tandard and accountability. Please describe how you've demonstrated leadership. David faced adversity with courage, determination, and unwavering faith. Please describe an	
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David faced adversity with courage, determination, and unwavering faith. Please describe an experience where you faced adversity and how you responded.	

Certifications by Applicant

I certify and agree that:

- 1. The information I provided in this application is complete and accurate to the best of my knowledge.
- I meet eligibility requirements of the Foundation scholarship program described in the enclosed Scholarship Selection Criteria & Administrative Procedures. I understand that my submission of an application and/or or meeting eligibility criteria does not guarantee that I will receive a scholarship grant.
- 3. Upon request, I will provide the Foundation proof of information to verify my eligibility, including a copy of my U.S. Income Tax Return and official transcripts of grades. My scholarship may be terminated if I falsify information or fail to use the award for purposes described in the enclosed Scholarship Selection Criteria & Administrative Procedures.
- 4. If I receive a scholarship grant, I: (A) authorize my educational institution to provide any information (including transcripts and information regarding enrollment) to the Foundation that it requests to verify my eligibility under the scholarship program, and (B) agree to refund any scholarship grant funds not used for purposes described in the enclosed Scholarship Selection Criteria & Administrative Procedures.

Applicant's Signature	Date	

Attach the Following to This Application:

- 1. Award Letter (All Scholarships received with dollars amounts)
- 2. Letter of acceptance from the College/University you will be attending
- 3. A certified or other official transcript of grades through at least the seventh semester of high school
- 4. A statement of seventh semester accumulative grade point average
- 5. One or more letters of recommendation from your teachers, school faculty, or members of the community
- 6. Schedule for the semester to confirm credits

Renewal applicants:

- 1. Schedule for the semester to confirm credits
- 2. A certified or other official transcript of grades for your most recently completed school year

Application Deadline, Postmarked: March 17th, 2017

Mail To:

David's Faith & Hope For Life Foundation P.O. Box 14 Goodrich, MI 48438

For Questions:

Email: info@faithhopelife.com