



DAVID'S

FAITH & HOPE FOR LIFE

FOUNDATION

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 plan to attend? _____

Address: _____

City: _____ State: _____ Zip: _____

Have you been accepted by that college? _____ Date Accepted: _____

Intended major course of study: _____

Teams or activities in which you have participated (sports, debate, yearbook, etc.):

Essay Questions (Attach additional sheets for any question, if necessary)

David was a leader in every aspect of life. He had the unique ability to unite individuals to achieve common goals. More importantly, David led by example. He always held himself to the highest standard and accountability. Please describe how you've demonstrated leadership.

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.
2. 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:

Friday, March 15th, 2019

Mail To:

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

For Questions;

Email: info@faithhopelife.com