



GLORIA WOLF BLEIER MEMORIAL SCHOLARSHIP

College Scholarship Application

"Kick for the Cause, Ltd." is a not for profit organization comprised of a group of volunteers who have come together to help families deal with breast cancer. Our mission is to provide assistance in patient services for families affected by this disease.

We hope to be successful with this mission.

"Nothing is more powerful as an idea whose time has come"
(author unknown)

PURPOSE:

The purpose of the *Gloria Wolf Bleier Memorial Scholarship* is to assist students who have been affected by breast cancer personally (self, relative or friend) or affected by breast cancer in some personal way.

Three (3) scholarships of \$1,000 in value each will be awarded in the summer of 2007.

The scholarships are not renewable; however a recipient may reapply in subsequent years while they are in college.

APPLICATIONS ARE AVAILABLE ONLINE AT:
[HTTP://WWW.KICK4THECAUSE.ORG](http://www.kick4thecause.org)

GUIDELINES AND INSTRUCTIONS:

Eligibility Requirements:

- In order to be eligible to be considered for a scholarship, an applicant must satisfy the following requirements:
 - Have been affected by breast cancer in some way.
 - Reside in either Nassau or Suffolk county, New York
 - Must plan to attend/or be attending an accredited college, university or trade school. (Scholarship checks will only be mailed to the school to be attended by the scholarship winner.)

Application Instructions:

- Type (preferred) or print all requested information in the spaces provided. Essays must be typewritten.
- Applications must be clearly legible and submitted in English.
- All information must be supplied. If any information is incomplete, the application will be rejected.
- Submit complete application packet only.
- Do not send additional materials.

In addition to completing the 3-page form, please submit:

- Copy of school transcript (high school or college) & SAT scores (if applying from high school)
- Brief essay (no more that 500 words) describing how breast cancer has impacted your life.
- 3 letters of recommendation from teachers, clergy or family (limit one from family)

Application Deadline: Applications must be POSTMARKED BY June 1, 2007.

Contact information for submission and inquiries:

Please **mail** (complete application packet only) to:

Gloria Wolf Bleier Memorial Scholarship

Anita Coiscou
40 Church St.
Northport, NY 11768

For additional information, please call Peter at: (516) 546-8817

Gloria Wolf Bleier Memorial Scholarship

APPLICATION FORM

PERSONAL INFORMATION

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

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

Date of Birth: _____ Social Security Number: _____ Male Female

High School: _____ Graduation Date: _____

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Parent's Marital Status: Single Married Separated Divorced Widowed

Siblings: Yes No If yes, how many: _____

If yes, # of siblings attending college: _____

POST-HIGH SCHOOL PLANS

Intended School: _____ Expected Graduation: _____

My School is: 4 yr college/university 2 yr college voc/tech school other

I will be/am enrolled: full time part time

I will live: on campus off campus at home

Intended field of study: _____

GUIDANCE COUNSELOR INFORMATION

Counselor Name: _____ Title: _____

School: _____ Telephone: _____

Signature: _____ Date: _____

Your high school or college transcript must accompany this application. The transcript must be an official copy provided by the guidance/registrars office.

ADDITIONAL BACKGROUND INFORMATION

Work Experience – (You may enclose a current resume in addition to filling out chart)

| COMPANY/POSITION HELD | FROM (mo/yr) | TO (mo/yr) | HOURS WORKED |
|-----------------------|--------------|------------|--------------|
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Extracurricular Activities – (You may attach a separate sheet in addition to filling out chart if necessary)

List school activities in which you have participated. Include sports, student government, volunteer projects, etc.

| ACTIVITY | GRADES OF PARTICIPATION | AWARDS/HONORS | OFFICES HELD |
|----------|-------------------------|---------------|--------------|
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Community Service – (You may attach a separate sheet in addition to filling out chart if necessary)

List all community volunteer service you have performed. Include all special awards and honors.

| TYPE OF ACTIVITY/ORGANIZATION | FROM (mo/yr) | TO (mo/yr) | AWARDS/HONORS |
|-------------------------------|--------------|------------|---------------|
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