



## KEEPIN 'EM REAL SCHOLARSHIP APPLICATION

### Information about the Keepin 'em Real and Crawlin' to a Cure:

#### Mission

The mission is to aid, assist and help individuals and their families impacted directly by breast cancer or any other type of cancer. Such assistance may be in the form of a scholarship to help support victims of breast cancer and the children of victims of breast cancer or any other type of cancer with tuition assistance to attend colleges, universities or trade schools.

#### The Vision

- Encourage and support cancer survivors and/or their children to continue their life-long learning.
- Support and financially assist families in obtaining medical treatment for cancer.
- Support other non-profit organizations in their quest for a cure for cancer.

#### Who may apply?

Any current senior at any public high school in Eagle and Garfield County whose life has been directly affected by a cancer diagnosis (i.e. personal or immediate family; mother, father, brother, sister or legal guardian).

#### Scholarship details:

Depending on the number of applicants we will award up to \$2500.00 in scholarships to each applicant, for the pursuit of higher education.

Each scholarship will be awarded on the merits provided in this application.

An interview before the Keepin 'em Real Scholarship Committee may be required. Only selected

applicants will be informed of the Scholarship Subcommittee's decision. Scholarship may be

renewable depending on set criteria yet to be determined.

This application and supporting materials must be submitted to the Keepin 'em Real Scholarship Committee no later than April 1.

# KEEPIN 'EM REAL SCHOLARSHIP APPLICATION

All parts of the application must be filled completely in order to qualify. Write "N/A" if not applicable.

NAME: \_\_\_\_\_  
*(First) (Middle) (Last)*

PERMANENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PARENT(S) OR GUARDIAN(S) NAMES: \_\_\_\_\_

CUMULATIVE GPA: \_\_\_\_\_

A copy of your school transcript must be provided with this application.

SCHOOL/COLLEGE: \_\_\_\_\_  
*(You plan to attend this fall)*

ADDRESS: \_\_\_\_\_  
*(Admissions Office)*

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

INTENDED MAJOR: \_\_\_\_\_  
*(If major is not known at this time, indicate as "undecided")*

EXTRACURRICULAR ACTIVITIES:

ACADEMIC HONORS:

COMMUNITY SERVICE ACTIVITIES:

LETTERS OF RECOMMENDATION:

Provide two (2) letters of recommendation. One letter from an academic teacher/advisor and one letter from a community service leader.

ESSAY:

Provide an one-page typed paper (12-point, Arial font, single spaced) response to the following question:

How has cancer affected your life?

VERIFICATION OF CANCER RELATED ILLNESS:

A letter from a doctor or documentation confirming cancer diagnosis.

This application and supporting materials must be submitted to Keepin 'em Real no later than April 1. Application may be access via [www.crawlintoacure.org](http://www.crawlintoacure.org). Once completed the application and supporting documents should be mailed to Keepin 'em Real Scholarship, c/o Vikki Hobbs, 1760 Gypsum Creek Road, Gypsum CO 81637 and must be postmarked by April 1.

Application Checklist:

- Application
- Essay
- Verification of Cancer Related Illness
- Two Letters of Recommendation
- High School Transcript

*I certify that the information provided in this application packet is complete and accurate to the best of my knowledge. I understand that falsification of information will result in termination of any scholarship granted. I understand that incomplete applications may not be considered. I certify that I have read the instructions and will comply with all requests for documentation of academic status.*

***Should I receive a scholarship, Crawl' To A Cure and Keepin' em Real may use my name and likeness in publicity materials relating to the scholarship.***

(Signature)

(Date)

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