

# A.R.C. Angels Foundation SCHOLARSHIP APPLICATION



## Applicant Information

Full Name: \_\_\_\_\_  
*Last* *First* *Middle Initial*

Address: \_\_\_\_\_  
*Street Address* *City/State/Zip Code*

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Birth Date: \_\_\_\_\_  
*MM/DD/YY*

## High School Data

School Name: \_\_\_\_\_

Graduation  
Date: \_\_\_\_\_  
*Month/Year*

ACT Score: \_\_\_\_\_ *Please attach official documentation from school.*

SAT Score: \_\_\_\_\_ *Please attach official documentation from school.*

Class Rank: \_\_\_\_\_ *Please attach official documentation from school.*

Cumulative  
GPA: \_\_\_\_\_ *Please attach official documentation from school.*

## College/University/Trade School Data

Please list all schools you are applying to. *Please attach any acceptance letters you have received to date.*

School Name/City/State: \_\_\_\_\_

School Name/City/State: \_\_\_\_\_

School Name/City/State: \_\_\_\_\_

School Name/City/State: \_\_\_\_\_

School Name/City/State: \_\_\_\_\_



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**Goals and Aspirations**

Briefly summarize your plans as they relate to your educational and career objectives and long-term goals.

**Suicide Prevention Activities**

Attach an essay of no more than 750 words describing your participation in activities related to suicide prevention.

**Recommendation(s)**

Attach at least one recommendation from a teacher, guidance counselor, or recent work supervisor who knows you well (you may choose to submit more than one). Recommendations may be in a separate sealed envelope but must be included with the application.

**Application Checklist**

The student is responsible for submitting all required materials to A.R.C. Angels Foundation on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Completed application
- GPA, class rank, and SAT score documentation from school
- Suicide prevention activities essay
- Recommendation(s)
- Copy of official acceptance letter to accredited college/university/trade school (when available)

**Certification**

The Board of A.R.C. Angels Foundation (AAF) has the sole responsibility for selecting recipients and awarding scholarships at its discretion, based on criteria as set forth in AAF's bylaws and policies. This application becomes the property of AAF. It is recommended the student keep a copy for their files.

*I acknowledge decisions are final. I certify I meet eligibility requirements as described on the AAF website and the information provided is complete and accurate to the best of my knowledge:*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail or deliver completed application and all supporting materials to:  
Rick Cantor, 16502 Meadow Hawk Drive, Wildwood, MO 63038**