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 **Scholarship Program**

**Criteria for Sandra’s Hope Foundation**

**Scholarship Program**

 The Sandra’s Hope Foundation scholarship is designed to assist young adults in their academic pursuits and is intended to help students with their financial burden due to the loss of a parent to breast cancer and/or whose parent is a breast cancer survivor/fighter. We would like to recognize a student for their achievements and assist them in attaining their career goals while their family has been financially impacted to treat this disease.

**Eligibility**

1. Must have lost a parent or guardian to breast cancer or must be a breast cancer survivor/fighter

2. Must be a high school senior, college freshman, sophomore or junior.

3. Overall High School/College Grade Point Average of 2.5 or better

4. Accepted at a 2-year or 4-year college or university in San Antonio Texas

5. No older than 25 years of age

6. Must be a U.S. Citizen or documented permanent resident.

**Criteria for Evaluation**

1. Career goals
2. Academic achievement
3. Potential for success
4. Leadership and character
5. Indication of how breast cancer has affected student and immediate family

**Nomination Materials**

The following materials should be provided to the Sandra’s Hope Foundation:

1. Teacher/Professor nomination letter
2. Application form completed by student and signed by teacher/professor
3. Two-page essay provided by student
4. High school/college transcript

**Instructions**

* 1. The application must be filled out by the student applicant. Please print or type.
	2. All requirements must be met and all information complete for an application to be considered.

**Sandra’s Hope Foundation**

**Scholarship Program**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last four digits of SSN# \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents’ names \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic Information**

High School GPA \_\_\_\_\_\_\_\_\_Class Rank \_\_\_\_\_\_\_\_\_\_\_\_Percentile Rank\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SAT Scores Verbal \_\_\_\_\_\_\_\_\_\_\_\_Math \_\_\_\_\_\_\_\_\_\_\_\_\_

ACT Scores Verbal \_\_\_\_\_\_\_\_\_\_\_\_Math \_\_\_\_\_\_\_\_\_\_\_\_\_

**Academics**

High School/College Academic Achievements \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**School Activities**

List other school activities in which you have been involved

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**College Plans**

College(s) or University(s) at which you have been accepted:

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Expected College Major:

**Essay**

In no more than 500 words, indicate why attending a college is important to you and how this scholarship will help you achieve your career goals while your family has been affected by breast cancer.

**Sandra’s Hope Foundation**

**Scholarship Program**

**Signatures**

I acknowledge that the information provided on this application is accurate.

Student Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To the best of my knowledge, the attached academic information is accurate:

High School/College Counselor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sandra’s Hope Foundation Student Scholarship Contact Information**

For any questions please email: sandrashopefoundation@gmail.com

Nomination Materials should be forwarded to the address below:

 2538 Melrose Canyon, San Antonio TX 78232 .

The Scholarship deadline is:

 May 5th 2019 .

Note: A student who accepts this scholarship and plans to participate at the college level as a non-scholarship, should carefully examine how the scholarship might impact the college or university. Any high school student who receives any form of financial aid or scholarship funds, including this scholarship, and who intends to participate at a school should consult with appropriate college counselors about how this scholarship might affect the student’s eligibility.

**Sandra’s Hope Foundation**

**Scholarship Program**

**Teacher Nomination Form**

 The Sandra’s Hope Foundation, local breast cancer advocates, would like to support a $1,000 scholarship. This scholarship is intended for a high school or college student who lives in San Antonio and who has lost a parent to breast cancer and/or whose parent is a breast cancer survivor/fighter. This scholarship is to help ease the financial burden for students who plan to attend college.

 The Scholarship Committee encourages you to nominate a high school student who has shown academic achievement, leadership skills, and strong promise for career goals.

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Please provide the following information:

Nominated Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a 250 to 300 word letter of nomination, indicating how this student meets the

Criteria for the scholarship.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_