

Cache Valley for Hope Cancer Foundation
Cancer Survivor College Scholarship Program

Dear Scholarship Applicant:

Cache Valley for Hope Cancer Foundation has established a scholarship program to give young cancer survivors the opportunity to pursue their post-secondary education from an accredited university, community college or vocational technical school.

The scholarship program is designed to ease the financial and emotional hardships associated with fighting cancer and to assist young cancer survivors in reaching their academic potential and fulfilling career dreams.

Enclosed is your application packet. Please carefully follow the application directions and checklist to ensure you have included all the required documents. **Only fully -completed application packets received by July 31, 2020 will be considered.**

Due to limited resources, the CVFH may not be able to award scholarships to all cancer survivors who apply. CVFH volunteers and staff will review applications through June, and recipients will be announced August 15, 2020.

If you have any questions while filling out the application packet, please call 435-760-3400. We wish you the best of luck in your academic pursuits.

Sincerely,

Roger Welsh
Founder, CVFH

Cache Valley for Hope Cancer Foundation
Cancer Survivor College Scholarship Program

FACT SHEET

PURPOSE:

The Cache Valley for Hope Cancer Foundation Scholarship Program gives cancer survivors the opportunity to pursue their post-secondary education from an accredited university, community college, or vocational technical school.

ELIGIBILITY:

- Must be diagnosed with cancer or the spouse or child of a cancer patient. Applicants must be age 50 or younger at the time of application.
- Scheduled to graduate from high school and/or continuing college in the upcoming school year.
- Must be a resident of Cache Valley, Utah- Southern Idaho.
- Accepted without condition to an accredited university, college, community college or vocational technical school.
- Must have a GPA of 2.5 or above.
- Must be registered as a full-time student at an accredited university, college, community college or vocational technical school in the upcoming academic year.

Only those applicants who meet all eligibility requirements will be considered for scholarship awards.

AWARD:

The Cache Valley for hope Cancer Foundation Cancer Survivor College Scholarship program provides an award of \$2,500 or more depending on need. Recipients can apply multiple years for a possible lifetime award of up to \$10,000 per student. After the initial award, scholarship renewal in subsequent years is based on successfully meeting program eligibility requirements, continuous academic achievement, and a level of commitment as a CVFH volunteer.

Due to limited resources, the CVFH may not be able to award scholarships to all cancer survivors who apply.

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CRITERIA FOR SELECTION:

All scholarships are awarded at the discretion of the CVFH volunteer scholarship committee and are based on the following weighted criteria:

- **Financial Need**: [50% weight]
Factored from a composite of family/student income and assets, number in household, unpaid medical bills, others in the family attending college and other scholarships/grants.
- **Community Service/Activities**: [20% weight]
Based on a composite of extracurricular activities, community involvement, honors or awards received and involvement with the CVFH.
- **Goals and Leadership Essay**: [15% weight]
Composite of long-term career plans, determination to reach goals, expression and organization of thought.
- **Letters of Recommendation**: [9% weight]
Based on a composite of the three provided recommendations.
- **Grade Point Average**: [6% weight]

REQUIREMENTS FOR SCHOLARSHIP RENEWAL:

- Complete the application as outlined in the application packet. Be sure to include a new essay and three letters of recommendation.
- At least 25 hours of volunteer work for CVFH per calendar year. ALSO, submit completed Student Volunteer Form with application.
- Maintain a minimum GPA of 2.5.
- Enrolled as a full-time student at an accredited university, college, community college or vocational technical school.

A previous award recipient is NOT guaranteed renewal of a scholarship award.

APPLICATION DIRECTIONS

Request an application packet by calling 435-760-3400. Completed applications must be received no later than **July 31, 2020** and enclosed with the following information:

- Three letters of recommendation, including one from a teacher or school counselor, and one from a physician.
- Essay of 500 words or less stating how a scholarship from the CVFH foundation will help further your academic career. Include your educational, occupational, and personal goals in the essay. Typewritten essays are strongly preferred.
- A copy of your academic transcripts from grades 9-12 and if applicable, your college/university academic transcripts.
- Letter of acceptance to an accredited university, college, community college, or vocational technical school (when available).
- Completed CVFH Financial Aid Form.
- Copy of the first two pages of your parents' (and yours if you were employed) 2019 IRS tax form.
- Completed Student Volunteer Form (only past recipients re-applying for scholarship).

Send completed applications to: CVFH
Attention Roger Welsh
135 South Main Suite 100
Logan, UT 84321

**Please do not staple or include front-to-back copies in your application packet.
Only complete applications will be considered.**

Cache Valley for Hope Cancer Foundation
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APPLICATION
2020/2021 Academic Year
Received no later than July 31, 2020

Name _____

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____

E-mail Address _____

Are you a U.S. citizen? Yes _____ No _____

Are you a permanent resident of Cache Valley, Utah, Southern Idaho ? Yes _____ No _____

Privacy Notice

Cache Valley for Hope Cancer Foundation (CVFH) cares about your privacy and protects how we use your information.
By providing this information, you understand and agree to let CVFH receive and share information about you which is necessary to help in processing your application.

Applicant Signature

Date

Parent or Legal Guardian Signature
(If applicant is minor, under 21 years)

Date

Type of Cancer _____ Date of Diagnosis _____

Cancer Site (if applicable)

Have you completed treatment? Yes _____ No _____

If yes, when was your last treatment? _____

List any long-term effects _____

Have you ever applied for a previous CVFH scholarship? Yes _____ No _____

Have you ever received a previous scholarship from CVFH? Yes _____ No _____

If yes, what year(s)? _____

When will you/did you graduate high school? _____

List all secondary schools attended, including current (graduating) school:

School/Institution	Dates Enrolled	City/State	Grade Attended

College/university/school you plan to attend:

Have you been accepted for admission? Yes _____ No _____

If not, when do you expect to be notified of acceptance? _____

What year will you be in college in 2020/2021?

- First (no previous college)
- First (previous college)
- Second
- Third
- Fourth
- Fifth (or more undergraduate)

Where do you plan to live?

- On Campus
- Off Campus (not home)
- Home
- Unsure
- Other

Estimated total cost of tuition and books in 2020/2021: _____

GPA from your most recent quarter/semester of school? (high school or college) _____

Note: You must include a copy of your most recent transcripts. They do not need to be official copies.

List any school related activities, volunteering/community service or employment.

List your personal interests and hobbies outside of school.

Briefly state your reasons for needing this scholarship.

Essay: Write an essay (500-word maximum) stating how a scholarship from the CVFH will help further your academic career. Include your educational, occupational, and personal goals in the essay.

How did you hear about the CVFH Survivor College Scholarship program?

- Physician/Hospital Staff
- High School
- Media, Newspaper or TV
- Friend/Family
- Internet
- CVFH Volunteer or Staff
- Other

FINANCIAL AID FORM

STUDENT INCOME

Student's Adjusted Gross Income in 2019 _____

Student's untaxed income/benefits in 2019 _____

Will the student work during the summer and/or 2020/2021 school year?

Yes ____ No ____

Student's **expected** summer (2020) and school year (2020/2021) income _____

Please list any outstanding medical bills not covered by insurance.

Other scholarships or grants received:

Scholarship	Amount	Terms of Scholarship

STUDENT ASSETS

Total (cash, savings, checking) account balances \$ _____

Total value of all investments \$ _____

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Employer _____

Number of years _____

PARENTS' ASSESTS

Total (cash, savings, checking) account balances \$ _____

Total value of all investments \$ _____

Value of home (renters write in "0") \$ _____ Amount owed on home? \$ _____

Other real estate \$ _____ Amount owed on other real estate? \$ _____

Are there any special financial circumstances that you would like to add?

Note: Applicant must attach a copy of the first two pages of parents' (and applicant's if employed) 2019 IRS tax form; either 1040, 1040A, or 1040 EZ.

Return to:
Cache Valley for Hope Cancer Foundation
Attn: Roger Welsh
135 South Main Suite 100
Logan, UT 84321

TEACHER OR SCHOOL COUNSELOR RECOMMENDATION

This recommendation is for a scholarship sponsored by the CVFH for young cancer survivors in Utah. A committee of volunteers will evaluate each applicant to determine winners. Your comments will help provide a more complete picture of the student for the committee's consideration. Thank you for your assistance.

Name of Scholarship Applicant _____ Date _____

Directions: The following is to be completed by the person making the recommendation, and must be attached to a letter of recommendation.

What are the first three words that come to mind in describing the applicant?

In comparison with other students you have known, please rate the applicant by circling a number from 1 to 5, with 5 being the highest ranking.

QUALITY	RATING	
Academic Motivation	1 2 3 4 5	no basis for judgment
Academic Potential	1 2 3 4 5	no basis for judgment
Creativity	1 2 3 4 5	no basis for judgment
Self-Discipline	1 2 3 4 5	no basis for judgment
Leadership Skills	1 2 3 4 5	no basis for judgment
Initiative	1 2 3 4 5	no basis for judgment
Reaction to Adversity	1 2 3 4 5	no basis for judgment
Analytical Ability	1 2 3 4 5	no basis for judgment
Oral Communication	1 2 3 4 5	no basis for judgment
Classroom Participation	1 2 3 4 5	no basis for judgment
Written Communication	1 2 3 4 5	no basis for judgment
Independence	1 2 3 4 5	no basis for judgment
Problem Solving	1 2 3 4 5	no basis for judgment

Your Name _____

Work Phone _____ Home Phone _____

Signature _____

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PHYSICIAN RECOMMENDATION

This recommendation is for a scholarship sponsored by the Cache Valley for Hope Cancer Foundation for young cancer survivors in Cache Valley. A committee of volunteers will evaluate each applicant to determine winners. Your comments will help provide a more complete picture of the student for the committee's consideration. Thank you for your assistance.

Name of Scholarship Applicant _____ Date _____

Date of Diagnosis _____

Personal Comments

In comparison with other students you have known, please rate the applicant by circling a number from 1 to 5, with 5 being the highest ranking.

QUALITY	RATING	
Creativity	1 2 3 4 5	no basis for judgment
Self-Discipline	1 2 3 4 5	no basis for judgment
Initiative	1 2 3 4 5	no basis for judgment
Reaction to Adversity	1 2 3 4 5	no basis for judgment
Oral Communication	1 2 3 4 5	no basis for judgment
Independence	1 2 3 4 5	no basis for judgment
Problem Solving	1 2 3 4 5	no basis for judgment

Your Name _____

Work Phone _____ Home Phone _____

Signature

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RECOMMENDATION

This recommendation is for a scholarship sponsored by the CVFH for young cancer survivors in Utah. A committee of volunteers will evaluate each applicant to determine winners. Your comments will help provide a more complete picture of the student for the committee's consideration. Thank you for your assistance.

Name of Scholarship Applicant _____ Date _____

Directions: The following is to be completed by the person making the recommendation and attached to a letter of recommendation.

What are the first three words that come to mind in describing the applicant?

In comparison with other students you have known, please rate the applicant by circling a number from 1 to 5, with 5 being the highest ranking.

QUALITY	RATING	
Academic Potential	1 2 3 4 5	no basis for judgment
Creativity	1 2 3 4 5	no basis for judgment
Self-Discipline	1 2 3 4 5	no basis for judgment
Leadership Skills	1 2 3 4 5	no basis for judgment
Initiative	1 2 3 4 5	no basis for judgment
Reaction to Adversity	1 2 3 4 5	no basis for judgment
Analytical Ability	1 2 3 4 5	no basis for judgment
Oral Communication	1 2 3 4 5	no basis for judgment
Independence	1 2 3 4 5	no basis for judgment
Problem Solving	1 2 3 4 5	no basis for judgment

Your Name _____

Phone Number _____

Relationship to Applicant _____

Signature

APPLICATION CHECK LIST

Be sure the following are enclosed:

- Completed Application Form
- Three recommendations (including one from a teacher or school counselor and one from a physician)
- Goal statement/essay of 500 words or less
- Copy of most recent academic transcripts
- Letter of acceptance to a post-secondary institution
- Completed CVFH Financial Form
- Copy of the first two pages of parents' most recent IRS tax form (applicant's also required if employed)
- Completed Student Volunteer Form (only past recipients re-applying for scholarship)

This form and attachments must be received no later than **July 31 2020**.
Only completed applications will be considered.

Send applications to:
Cache Valley for Hope Cancer Foundation
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135 South Main Suite 100
Logan, UT 84321

Recipients will be notified July 31, 2020. Payments will be sent directly to student's school.