



Jeanette Cartwright Memorial Scholarship Student Application

Please use the following checklist as a guide to the requirements for completing your application. Please mail your completed application to:

H.O.P.E.
P.O. Box 175
Shrewsbury, PA 17361

- Complete Paper Application
- Submit a brief narrative summarizing the following ideas:
 - What you aspire to do when you complete your education
 - Why you are applying for this scholarship
 - How the cancer diagnosis has impacted your life
 - Any significant facts about you or your family's story
- 3 Letters of Recommendation
- Copy of High School Transcript

Jeanette Cartwright Memorial Scholarship

Student Application (page 2 of 4)

Date of application: ____/____/____

Student's Name: _____

Date of Birth: ____/____/____

Home Address: _____
Street City State ZIP

Phone Number: ____ - ____ - ____

Family Information

Name of Parent(s)/Guardian(s): _____

Parents are: Unmarried Married Separated Divorced

Father Disabled Father Deceased

Mother Disabled Mother Deceased

Father's Occupation: _____ Father's Employer: _____

Mother's Occupation: _____ Mother's Employer: _____

Siblings in Household:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Family Member Diagnosed with Cancer:

Name: _____ Relationship to Student: _____

Does this family member reside in your home? Yes No

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High School Education & Activities

Name of High School: _____

Extracurricular Activities and Honors:

Favorite Subjects:

College Planning

What college or post-secondary school do you plan to attend?

What is the status of your application? Accepted In Process

Anticipated Expenses: Tuition & Fees: \$ _____

Room & Board: \$ _____

Other Expenses: \$ _____

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Student's Contribution to Education

Do you have a part-time job? Yes . . . Name of Employer: _____

No . . . Do you plan to work this summer? Yes No

Other sources of financial aid you have applied for:

It is understood that the Jeanette Cartwright Memorial Scholarship is gifted only if the first year of post-secondary education is completed. The scholarship must be considered a loan and repaid if the first year is not completed, unless prior approval is granted by H.O.P.E.'s Board of Directors. Proof of completion of the first year of post-secondary education can be provided with a copy of that year's college transcript. Please mail transcript to:

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Shrewsbury, PA 17361

Applicant's Signature: _____ Date ____/____/____

Parent/Guardian's Signature: _____ Date ____/____/____