



Scholarship of Hope[®] Application (Page 1 of 2)

TO THE APPLICANT:

Please complete this application so we can determine your eligibility for receiving funds set aside to help students who plan to go on to postsecondary education and who satisfy the criteria developed by **Wishes & More**[®]. Following are the details regarding the **Scholarship of Hope**:

Students planning on attending any accredited school program are encouraged to apply, regardless of the cost or duration of the program.

If you have been granted a wish by **Wishes & More** and have not yet finished your postsecondary education, your scholarship will be applied to the 2010-2011 school year. After your application has been received by **Wishes & More**, a check will be sent to the school no later than mid-August after verifying your school of choice.

Wishes & More shall provide a scholarship of up to \$1000 to those who qualify. If your postsecondary education does not cost \$1000, you will receive a scholarship for what was charged by the school. If you do not receive the full \$1000 from **Wishes & More** and continue your postsecondary education, you can continue to apply for the scholarship until you have received the entire \$1000.

Students who are awarded full scholarships (tuition and room & board) by postsecondary institutions are not eligible to apply for or receive a monetary award from **Wishes & More**. If you are awarded a scholarship from **Wishes & More** and later receive a full academic scholarship, please contact **Wishes & More** so your award can be transferred to another student.

If you have been granted a wish by **Wishes & More**, do not owe your school any money and anticipate no further expenses before the age of 23, we regret to inform you that you are not eligible for the **Scholarship of Hope**.

Wishes & More reserves the right to process only those applications that are complete. Materials should be sent to **Wishes & More** no later than **May 30, 2010** via email, fax, or postal service. Make and retain copies before sending. Applications received after May 30, 2010 will still be considered.

Certification and Permission to Use Applicant Information to Announce Scholarship Recipients

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

I agree that if I am offered and accept an award from **Wishes & More**, they may use my name, the name of my community, the name and address of my school, the amount of the award, and the name of the postsecondary institution I will attend in press releases, public announcements, and other fundraising or promotional materials in all media (including the internet), to advance the non-profit objectives of **Wishes & More**.

By checking this box, I will also allow my picture and story to be used in all **Wishes & More** media.

Applicant's Signature _____

Date _____

Parent Signature (if student is less than 18 years old) _____



Scholarship of Hope®

Application (Page 2 of 2)

| For Office Use Only | | | | |
|---------------------|----------------|----------------|----------------|----------------|
| Wish # | Amount Awarded | Amount Granted | Amount Pending | Date App Rec'd |

PLEASE PRINT OR TYPE

| Applicant Data | | | | |
|---|--------|---------|--|--|
| Name | | | <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Permanent Address | | | Date of Birth | |
| City | State | Zip | Email | |
| Phone | | | Alternate Phone | |
| Name of parent/guardian | | | Email | |
| Parent/Guardian Address | | | Phone | |
| City | State | Zip | Alternate Phone | |
| School Data | | | | |
| High School Attended | | | Graduation Date (MO/YR): | |
| Address | | | Phone | |
| City | State | Zip | | |
| Would you be interested in being presented your scholarship at your high school scholarship banquet? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| Postsecondary school for which scholarship is requested: | | | | |
| <input type="checkbox"/> 4-year College/University <input type="checkbox"/> Community College <input type="checkbox"/> Vo-Tech <input type="checkbox"/> Other | | | Accredited? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Address | | | Phone | |
| City | State | Zip | | |
| Current year in postsecondary program (during 2010-2011 school year): Circle One: 1 2 3 4 5+ | | | | |
| Student will: <input type="checkbox"/> Live on campus <input type="checkbox"/> Live off campus <input type="checkbox"/> Commute | | | Enrolled: <input type="checkbox"/> Less than half time <input type="checkbox"/> Half-time or more <input type="checkbox"/> Full-time | |
| Proposed Graduation Date (MO/YR): | | | Proposed field of study: | |
| Other Awards | | | | |
| Please list below the names and amounts of any grants or scholarships that you have been awarded for the coming school year. | | | | |
| Name of Award | Amount | Granted | Pending | |
| | | | | |
| | | | | |
| | | | | |
| Photograph of Yourself | | | | |
| Please send a current photograph of yourself with your application. | | | | |
| Submit Application (Two Pages) | | | Contact <i>Wishes & More</i> with any questions. | |
| Mail: 961 Hillwind Rd., Minneapolis, MN 55432 Fax: (763)502-4707 E-mail: carol.bistodeau@wishesandmore.org | | | Phone: (763)502-1500 Toll Free: (800)780.1500 Web: www.wishesandmore.org | |
| <i>This application is available at our website, under "More is..."</i> | | | | |