

# Angel Wings Foundation: Application

## *Sarah Cypher Memorial Scholarship*

**Biographical Information:**

Name:	Phone:
Address:	DOB:
Mother/Guardian Name:	Occupation:
Father/Guardian Name:	Occupation:
Intended Major or Vocation:	GPA:
School you plan to attend in the fall:	ACT/SAT score:

**Leadership Activities:** List the appropriate extracurricular high school activities and community programs below. Include all awards, positions of leadership held by you, as well as membership in various student organizations.

Activity	9	10	11	12	Accomplishments	Hours Involved

**Community Involvement:** List all community activities in which you have participated and not any major accomplishments in each. These should be activities outside of school. Examples: church groups, scouts, volunteer groups, civic organizations).

Community Involvement	9	10	11	12	Major Accomplishments	Hours Involved

**School Activities:** List all activities in which you have participated during high school. Include clubs, teams, and musical groups. Please do not repeat activities listed elsewhere on this application.

Activity	9	10	11	12	Accomplishments	Hours Involved

**Honors and Awards:** List any honors, recognition, or awards that you have received.

Honor or Award	9	10	11	12	Group or Activity

**Work Experience:**

Employer	Position	From	To

**Statement of Financial Need: Briefly state your need for financial assistance. What is your plan for financing your future years of education?**

**Personal Essay:** Please take some time and share some important information about you, your history, passion and goals for the future. Why do you think you would benefit from the Sarah Cypher Memorial Scholarship?

I hereby give consent to Angel Wings Foundation to contact and verify my information contained in this application and attachments by contact with individual, Emerald Ridge High School or other entity. I understand that intentionally false or misleading information I have submitted on this application will result in cancellation of the award and/or return of expended monies. If awarded this scholarship, I agree to provide Angel Wings Foundation with a thank you letter and photo for possible use in promotional materials such as the Foundation's website and newsletter.

\_\_\_\_\_  
Signature of Applicant                      Date

\_\_\_\_\_  
Signature of Parent/Guardian                      Date