



**THE CAUSE FOUNDATION/BERNI SCHAFFER  
MEMORIAL SCHOLARSHIP PROGRAM  
SCHOLARSHIP APPLICATION  
Application Deadline: February 15**

It is the policy of The CAUSE Foundation to review each application without regard to an individual's race, creed, color, religion, gender, age, national origin, nature of disability or sexual orientation

**APPLICANT**

1. Name: \_\_\_\_\_  

Last
First
Middle
2. Home Address: \_\_\_\_\_  

Street
City
State
Zip
3. Telephone: ( ) \_\_\_\_\_ 4. SS# \_\_\_\_\_
5. Parent or Guardian Name: \_\_\_\_\_  

Last
First
Middle
6. Address, if different from applicant: \_\_\_\_\_  

Street
City
State
Zip
7. Telephone, if different from applicant: ( ) \_\_\_\_\_
8. Name of deceased parent: \_\_\_\_\_ Check one: Flight Att \_\_\_\_\_ Spouse \_\_\_\_\_

**SCHOOL DATA**

1. Name and Address of Present High School: \_\_\_\_\_  

Street
City
State
Zip
2. High School Graduation Date: \_\_\_\_\_  

Month
Year
3. Post-secondary school for which scholarship is requested: \_\_\_\_\_
4. School is: \_\_\_ 4 yr. college/university \_\_\_ 2 yr. College \_\_\_ vocational/tech school \_\_\_ other
5. Enrollment: \_\_\_ full-time \_\_\_ part-time \_\_\_ less than half-time

**APPLICANT PROFILE:** (for this and other such questions, use an additional sheet of paper if necessary.)

1. Academic Achievement. Your school transcript will contain a summary of subjects and grades. List below academic honors and/or awards you have received. Attach student resume if available.

Honor/Award	Reason for Award	Year Awarded (Fr. Soph. Jr. Sr.)

2. High School Activities: List below all activities (school and/or community) in which you have participated to a significant degree and to which you have made a positive contribution during high school years.

Activity	Position Held	Years of Participation (Fr. Soph. Jr. Sr.)	Recognition

3. Paid Work Experience (Full or Part-time): List below work experience during high school years.

Employer	Job Description	Dates	Hours Per Week

4. Unusual Circumstances: Please report any unusual family or personal circumstances which you think warrant consideration.

**FINANCIAL INFORMATION**

1. Annual Family Income Range:

2. Total number of persons in the household (include parents, applicant and other dependents): \_\_\_\_\_

3. Number of dependents, including applicant, who will attend college full-time during upcoming academic year \_\_\_\_\_

2. Estimate of Anticipated Annual Educational Expenses:		Anticipated Income to Meet Your Educational Expenses:		Requested or Applied for
Tuition & Fees	\$ _____	Personal Savings	\$ _____	\$ _____
Books & supplies	\$ _____	Family Resources	\$ _____	\$ _____
Room & board	\$ _____	College Financial Aid	\$ _____	\$ _____
Personal expenses	\$ _____	Outside Employment	\$ _____	\$ _____
Other _____	\$ _____	Other scholarships (list)	_____	_____
_____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	_____	\$ _____	\$ _____
_____	\$ _____	_____	\$ _____	\$ _____
<b>Total</b>	\$ _____	<b>Total</b>	\$ _____	\$ _____

**ESSAY**

Please write an essay (not to exceed two typewritten, double-spaced pages) describing your educational plans as they relate to your personal aspirations and career goals. Include motivating factors or experiences which have helped to shape your personal philosophy and/or your educational plans/career goals. Applications without an essay will not be considered.

**LETTERS OF RECOMMENDATION**

Applicants are required to submit two recommendations, one from a high school teacher and one from any adult of your choice who is not a family member. Recommendation forms are provided and should be returned along with your application, essay, high school certification form and official high school transcript. All required application forms should be sent to The CAUSE Foundation on or before the application deadline.

**CERTIFICATION**

I certify that all information provided in this application is true and complete to the best of my knowledge.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Send your completed application to:  
 The CAUSE Foundation  
 PO Box 550  
 Parker CO 80134  
 (888) 288-9036

The CAUSE Foundation/Berni Schafer Memorial Scholarship  
Program