**CHILDHELP ROSS Scholarship FUND APPLICATION**

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| Date of Application: Name of Childhelp Contact:  |
| 1. | Last Name: | First Name: |
| 2. | Mailing Address:Street: City: State: Zip:  |
| 3. | Telephone Number: ( ) Email Address: |
| 4. | Date of Birth: Month Day Year Gender:  |
| 5. | Cumulative Grade Point Average (GPA) – Last Academic Year: \_\_\_\_\_\_\_\_\_\_  |
| 6. |  Would you be the first person in your family to go to college: YES \_\_\_NO \_\_\_\_  |
| 7. | Name and address of High School attending or attended:If you have graduated, what year did you graduate? \_\_\_\_\_\_\_\_\_\_\_ |
| 8. | 1. List any academic honors, awards and membership activities while in high school:
2. List your hobbies, outside interests, extracurricular activities and school related

volunteer activities: |
|   9.  | 1. If you have decided which college, junior college, or trade/technical school you will,

or would like to attend, please list school name and when you would like to begin: 1. If not, list your top choice(s):
2. If known, what specialty/major do you plan to study as you continue your education?
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|  10. | Employment History (if any):Dates of Employment Business Name City State Position Held/Job Duties  |
|  11.  | Name & address of parent(s) or legal guardian(s): **(Include address if different than your own listed in Question 2.)** Name(s) :Street: City: State: Zip:Home phone of parents or legal guardians: Work phone:  |
| 12. | Please prepare and submit an essay (no more than 1,000 words) which includes answers to the following:1. How has your experience at Childhelp shaped who you are today?
2. How have you dealt with and overcome one or more challenges or obstacles in your life and how will this help you succeed in higher education and beyond?
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|  | **Signature:**  |

**Please submit completed application via email to** **cmelvin@childhelp.org** **or via U.S. Mail to the following address.**

Childhelp Inc.

 Attn: Cheridan Melvin

 6730 North Scottsdale Road, Suite 150

 Scottsdale, AZ 85253