

**THE CAUSE FOUNDATION/BERNI SCHAFER
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, sex, 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

