



2010 SCHOLARSHIP APPLICATION FORM

Mandatory Requirements:

- **Must be a current or former youth of the FOSTER CARE SYSTEM in the State of Virginia**
- **Must be completing HS and enrolling in a two or four years University commencing in Fall 2010**

- 1) Fill out the application form completely and sign.
- 2) **In 500 words or less**, clearly explain how this scholarship will assist you in achieving your educational career Goals as you transition from Foster Care to Independent Living. Essays **MUST** be typed or printed neatly and submitted with completed application information.
- 3) If selected, what educational or training program would you like to attend? Specify how the fund awarded will be used.
- 4) Applicants must provide a **current** school transcript showing GPA at the time of application (Copy is acceptable)
- 5) Applicant must provide two letters of recommendation; one must be from a school counselor (if any), faculty member or other individual knowledgeable with applicant's qualifications.
- 6) Applications must be received by the specific TIME via Email.

I. APPLICANT INFORMATION

Last Name: _____ First Name: _____
Address: _____ State: _____ Zip Code _____
Email: _____

Daytime Phone: _____ Best time to call: _____
Date of Birth: _____ Age: _____ Gender: Male Female

Applicant Signature: _____ Date: _____

I hereby certify that the information I have submitted as correct. I authorize the release of this information to members of the LivvyLove Foundation Scholarship Committee and will provide additional information or verification upon request.

If granted the scholarship, I agree to the publication of my information such as photos, first name etc., excluding last name. I agree to the conditions established for this scholarship award by the LivvyLove Foundation and I understand that this scholarship award is contingent upon the verification of information provided and that neither the LivvyLove Foundation nor any of its members are responsible for any financial liability.

Parent(s)/Guardian(s) Signature, if applicable: _____
Applicant's Signature: _____
Date Submitted: _____

Completed application **SHOULD BE EMAILED** no later than October 30, 2010 at 5:00 PM

LivvyLove Foundation Scholarship
Scholarship@livvylovefoundation.org
www.livvylovefoundation.org