

# **Zaching Against Cancer Foundation**

# Spirit Award Scholarship Application – 2024

The Zaching Against Cancer Foundation (ZACF) is proud to present **six Spirit Award Scholarships** to Maryland students who have excelled in High School while overcoming personal hardships relating to cancer. Hardships include being a cancer survivor, a caregiver for someone with cancer, or a relative of a person with cancer. For 2023 ZACF will provide six \$2,500 scholarships to Maryland High School students in public or private schools who are planning to attend a two- or four-year college or trade school.

- 1. Scholarship Criteria:
  - Minimum 3.0 GPA.
  - Must be a senior in high school.
  - Must plan to attend a two or four-year college or university or trade school within the following academic year of receipt of the scholarship.
  - Must have overcome some sort of significant hardship, medical challenge, and/or family issue relating to cancer during their life.
  - Complete the Application, including 3 individual nomination forms.
  - Is not a family member of a Zaching Against Cancer Foundation Board or Scholarship Selection Committee Member.

#### 2. Application Deadline

## The application deadline is April 1, 2024

## No scholarship applications will be accepted after this date.

Winners will be notified by the second week of May and scholarship awards will be presented during the High School Awards Ceremony.

## 3. Application Procedure

Complete and return all the following information via mail or email:

- Application for ZACF Spirit Award (MUST BE TYPED)
- 3 Nomination Forms two must be from teachers or other school staff (1 of these must be from a teacher)
- High School Transcript
- Letter of recommendation (optional but encouraged)

## Return the COMPLETED packet to:

## ALL DOCUMENTS ARE REQUIRED AT THE TIME OF SUBMISSION

#### **Electronically to:**

lynn@zachingagainstcancer.org

or

#### Mail Hard Copy to:

Zaching Against Cancer Foundation 6700 Alexander Bell Drive, Suite 185 Columbia, MD 21046

Phone - 443-319-5394



## **SECTION I: PERSONAL INFORMATION**

Name:				
	(First)	(Middle)	(Last)	
Short form of first name OR Nickna	me to be used in press i	releases and program (e.g. '	"Tom" or "Sue")	_
Address:				
Address:(Street)	(City)	(Zip)	(County)	
Home Phone #			Cell Phone #:	
E-mail address (Nominee):	E	-mail address (Parent/Guar	dian)	_
Are you a cancer survivor?  SECTION II: ACADEMICS	ES NO			
1. Unweighted GPA (Grade Point Av	verage)/Weigh	ted GPA 2. Curre	ent High School	
3. S.A.T. score (Optional): verbal 4. A.C.T. score (Optional): verbal	; mathematics ; mathematics	;; writing ; combined	; total	
5. List honor societies and scholars National Merit semi-finalist, etc.	•	se be specific and note eac	h separately. (i.e. Member of National Hono	or Society,
6. If you have committed to a College	ge/University please tel	l us the School and your int	ended major, if known:	
SECTION III: EXTRACURRI	CULAR ACTIVITI	<u>ES</u>		
•		•	ethletic teams, student government, the concert band, religious or comm	
Athletics /Extracurricular				
Sport (JV or V)/Club/Activity	Years		Position Held (Captain/Editor)	

Community Activities	/Work	
Organization	Years	Position Held/Description of Duties
-		
CECTION IV. Face	·Overtiens	
SECTION IV: Essay		on a hardship, medical challenge, and/or family issue that you have overcome
	= :	ore graduating High School. Hardship could include being a cancer survivor,
-	•	e who battled cancer. Please limit each response to 1,000 words or less. <b>To</b>
read Zach Lederer's s	tory please visit <u>w</u>	vww.zachingagainstcancer.org
· ·	=	by Cancer? Explain how this hardship affected you and how you d courage as a survivor or a caregiver.
Please type your essa do not exceed 1000 v	•	parate document and submit it with application. Please
2) How has Cancer		•
Please type your essa Please do not exceed	•	parate document and submit it with the application.
Certification		
	t all the information	on contained in this application is true to the best of our knowledge, with the
understanding that m	iisstatements will i	result in the disqualification of the applicant from consideration.
Signature of Applican	t	Date
Signature of Parent or	r Legal Guardian	Date



# **Zaching Against Cancer Foundation Spirit Award Scholarship**

#### **NOMINATION FORM**

skills and strong character when faced with adversity.

PLEASE HAVE <u>3</u> ADULTS COMPLETE A <u>SEPARATE</u> NOMINATION FORM. Two of these adults must be school administrators, teachers, or coaches (one must be a teacher). The third adult may be a work/volunteer supervisor, religious leader, personal family friend etc.

The Zaching Against Cancer Foundation (ZACF) supports scholarships for Maryland high school students planning to attend a two- or four-year college or trade school. Please contact <a href="mailto:lynn@zachingagainstcancer.org">lynn@zachingagainstcancer.org</a> with any questions.

**ZACF Spirit Award Scholarship Mission Statement** - The ZACF believes that high school students should be recognized for their achievements while overcoming hardships relating to cancer and should be encouraged to pursue education and career goals. The ZACF Spirit Award encourages you to nominate a high school student who has shown academic achievement, leadership

Nominated Stu Please rate the					ollowi	ing Ca	tegor	ies:				<del></del>	
	Achievement	Positive Impact in Classroom	1	Disciplined work habits	Maturity	Motivation		Reaction to Setbacks	Integrity	Willingness to help	others Self Confidence	Initiative	Overall Rating
No Basis													
Below Average													
Average													
Good (above Average)													
Very Good (well above average)													
Excellent (Top 10%)													
Outstanding (top 5%)													
Comments – C	omme	nts are str	ongly co	nsidere	d by	the se	lectio	n comn	nittee	(750 w	ords or	less)	
Name						Signat	ure						
Relationship to													
School Address							 ne						
		ainst Canc	or Found	 lation 6"	700 A I	1 110  avend	lor Da	II Dr. S	ito 10	25 Caler	nhie M	D 2104	6 112 21