



# MSCF scholarship application for four-year University

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
**(physical)**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
**(mailing)**

I am currently attending \_\_\_\_\_ in the \_\_\_\_\_ School District  
(high school name)

Social Security No. \_\_\_\_\_

Cell Number \_\_\_\_\_ Home Phone \_\_\_\_\_  
(must be a current contact number)

Father's Name \_\_\_\_\_ Address \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Mother's Name \_\_\_\_\_ Address \_\_\_\_\_

Mother's Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Total # of Children Dependent on Family Income \_\_\_\_\_ Total Family Income \$ \_\_\_\_\_

Please list any unusual expenses which might enable the committee to assess the degree of need more accurately (i.e. prolonged illness of a family member, uninsured losses, accidents, etc.)

\_\_\_\_\_  
\_\_\_\_\_

How many family members are in or about to enter college? \_\_\_\_\_

How much financial help will your parents be able to provide per month for your schooling? \_\_\_\_\_

What percentage of expenses must you earn while in school? \_\_\_\_\_

Current Grade Point Average? (GPA) \_\_\_\_\_ (Non-weighted)

SAT TOTAL SCORE: \_\_\_\_\_ ACT TOTAL SCORE: \_\_\_\_\_

If you have taken any AP classes during your HS career, have you received any  
college credits? \_\_\_\_\_

List all colleges you have applied to and which ones you've been accepted to: (use additional sheets if necessary)

A. \_\_\_\_\_ Have You Been Accepted? \_\_\_\_\_  
(Name of School/Location of School)

B. \_\_\_\_\_ Have You Been Accepted? \_\_\_\_\_  
(Name of School/Location of School)

C. \_\_\_\_\_ Have You Been Accepted? \_\_\_\_\_  
(Name of School/Location of School)

D. \_\_\_\_\_ Have You Been Accepted? \_\_\_\_\_  
(Name of School/Location of School)

Proposed major: \_\_\_\_\_

My occupation goal is: \_\_\_\_\_

How long will your course of study be? \_\_\_\_\_

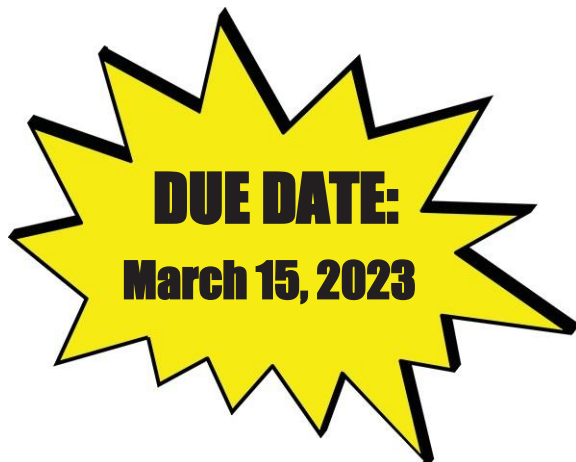
Have you applied for and received any scholarships or grants? (list below, use additional sheets if necessary)

Name of Scholarships/grants: \_\_\_\_\_

Amounts received: \_\_\_\_\_

- On a separate sheet of paper list your high school and community activities, special interests and hobbies and any volunteer hours.
- Write a personal letter explaining your hardship.
- Please attach an **official sealed** copy of your high school transcript (may be obtained from your counselor)
- Please attach a letter of recommendation from one of the following; school teacher, administrator, program coordinator or from an upstanding member of the community.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**\*NOTE: Late and/or incomplete applications will not be accepted**



MAIL TO:

17100 Bear Valley Rd #533  
Victorville CA 92395

## **Scholarship Policy**

Scholarships funded by the Mourning Sun Children's Foundation will be offered to graduating seniors residing in the Victor Valley and attending a comprehensive or continuation high school in the Victor Valley (to include VVUHSD, AVUSD, HUSD, Snowline School District, Lucerne Valley School District, Oro Grande School District)

Recommended standard amounts per annum (award amounts subject to the discretion of the scholarship committee and/or board of directors):

MSCF Scholarship is for a qualified four-year institution for an amount of up to \$5,000 (per year for four years)

This scholarship will be presented to one student who has lost a parent or loved one or experienced a tragic event in his/her life, which has had a significant impact on their financial ability to attend college, yet has shown outstanding qualities of character, involvement in school and community activities. This person must have demonstrated the determination to further his/her studies at the college level and show promise of usefulness to business and society later in life.

### **The scholarship committee will require the following from all applicants.**

- Application form
- A personal letter written by the applicant explaining their loss or the tragic event he/she has experienced and how it has affected his/her life
- A current certified sealed high school transcript (may be obtained through counselor)
- Letter of recommendation or endorsement from a school teacher, administrator, program coordinator, or upstanding member of the community
- List of your community involvement, volunteer hours, etc.

### **The committee's screening process may include, but is not limited to, the following:**

- Review of financial need
- Average grades in high school courses that are compatible with the college major selected, which may help demonstrate the student's future success in continuing education.
- Consideration of applications to attend out of state institutions
- Your community involvement, volunteerism, and your willingness to continue

### **Additional information:**

- After the scholarship has been awarded, the recipient may request to postpone the start of their college enrollment for up to, but no more than, two years.
- After the postponement, the student must notify the Foundation of intent to enroll, submitting their name, address, etc., and school of enrollment.
- Scholarship proceeds will no longer be available after four years from the start of the recipient's first year of college.
- No funding is available for post-graduate work.
- The recipient of an award must carry a minimum of 12-semester units.
- Renewals depend upon the Foundation's assessment of progress based upon submitted transcripts and the maintenance of a 2.5 accumulative GPA.
- Scholarships will not be awarded to students who are related to any member of the Board of Directors for the Mourning Sun Children's Foundation.

**LATE AND/OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**