



CUT OUT CANCER AT MILANO'S SCHOLARSHIP

We invite you to apply for the Cut Out Cancer at Milano scholarship.

The \$3,000 scholarship will be awarded to a graduating senior from one of the following CT based high schools (Bloomfield High School, Conard High School, Hall High School and Windsor High School) who has demonstrated a commitment to helping make a difference in the lives of people undergoing cancer treatment.



Scholarship information

Requirements and Prerequisites

- Must be a graduating senior from either Bloomfield High School in Bloomfield, CT, Conard High School in West Hartford, CT, Hall High School in West Hartford, CT or Windsor High School in Windsor, CT.
- Must be accepted or plan to be enrolled fulltime to commence in fall 2023 at a 2 or 4 year accredited college, trade school or personal care school

Scholarship Considerations

- Essay question response – 90%
- Letter of recommendation – 5%
- Academic achievement – 5%

Required Materials for Application

- Completed scholarship application (incomplete applications will not be considered)
- A student resume no more than 2 pages in length which highlights your community service
- Official **sealed** high school transcript
- One letter of recommendation from a leader, supervisor or sponsor of the program that you developed or participated in, in a **sealed envelope**
- Write an essay (no more than 250 words) in response to the prompt questions provided on the application
- Please do not submit any other materials other than those requested, they will not be considered in the evaluation process

Review and Evaluation Process

- All applications must be postmarked by **April 1, 2023**
- Applications will be evaluated by a 6 member committee
- Each committee member will score in the 3 categories and the administrator will tally and compile the scores
- The scholarship recipient will be notified in mid to late May 2023



CUT OUT CANCER AT MILANO'S APPLICATION INFORMATION

Applicant Name

Date of Birth

Applicant Address

City/Town

State

Zip Code

Phone

Email

Applicant Checklist

- Application Information Page
- Student Resume Highlighting Your Community Service (no more than 2 pages in length)
- Academic Information Page
- 1 Letter of Recommendation from someone you participated with in your support of individuals undergoing cancer treatment
- Essay (number of words per questions provided on prompts on the Essay Page)
- Signed Scholarship Privacy Statement
- Sealed Academic Transcript from High School

Certification Section

In submitting this application, I/we certify that the information provided is complete and accurate to the best of my/our knowledge. If requested, I/we agree to submit proof of the information that is given on this form. I/we understand that falsification of information may result in termination of any scholarship granted and that this application and attached materials become the property of the Cut Out Cancer CT organization. I/we consent to being contacted by the Cut Out Cancer CT organization about any questions regarding this application and for notification purposes regarding a possible funding award.

I/We also give permission for the Cut Out Cancer Inc organization to contact my current school, community service contacts, or recommendation providers regarding questions about information included with this application.

Applicant's Signature _____ Date

Parent/Guardian Signature _____ Date

Parent/Guardian Printed Name

Relation to Applicant



CUT OUT CANCER AT MILANO'S ACADEMIC INFORMATION

Instructions:

This section **must** be completed and **SIGNED** by an official of your school.

The GPA **must** be reported as its equivalent on a 4.0 scale and certified by the school official.
Cumulative High School grade point average:

School official's signature _____ Date:

School official's name & title

Phone

Email

High School

Address

(Street)

(City)

(State)

(Zip Code)

Important: Enclose this academic profile with the application packet (do not put it in the sealed envelope with your transcript). Your office transcript, including most current grades from where you are currently attending high school must be submitted in a *sealed envelope* and then submitted along with the rest of the application packet.

Post Graduate Education Information

College, trade school, personal care services school you plan to attend during the 2023-2024 academic year

(if you are undecided, please list your first two choices):

1st Choice

City & State

2nd Choice

City & State



CUT OUT CANCER AT MILANO'S LETTER OF RECOMMENDATION/ESSAY

Letter of Recommendation

Each applicant must submit 1 letter of recommendation from a leader, supervisor or sponsor of the program that you developed or participated in. The letter **must be submitted in a separate sealed envelope** along with all other application materials as per the instructions on the final page of the application packet.

Essay Questions

Please write an essay of no more than 250 words in the relation to the essay prompts provided below. ***Please do not send your general college application essay.***

(Please double space and use at least 12 pt. font of your choice. If you cannot edit this PDF file, please type, print and submit the essay by attaching it to this page.)

- 1. Please tell us how you have personally made a difference in the lives of people undergoing cancer treatment. (no more than 250 words)***
- 2. What is your message to an individual faced with a cancer diagnosis? (1-2 sentences)***
- 3. Tell us something unique about yourself or something you are very proud of. (1-2 sentences)***



CUT OUT CANCER AT MILANO'S PRIVACY STATEMENT AND APPLICATION SUBMISSION INSTRUCTIONS

Protecting Your Privacy

The Cut Out Cancer CT organization maintains the highest level of confidentiality with respect to your scholarship application information.

All application materials will be shredded once the scholarship has been awarded.

The Cut Out Cancer CT organization does not and will not sell, trade, or exchange your scholarship application information.

I have read, and agree with, the above Protecting Your Privacy policy regarding submission of a Cut Out Cancer at Milano's Day Spa scholarship application. I understand that my image and identity may be used in publicity and promotional materials only if I am chosen as the scholarship recipient.

Applicant Signature _____ Date

Parent/Guardian Signature (if applicant is under age 18)

_____ Date

A copy of this page must be signed and returned with your scholarship application.

Submit Your Application

- All materials must be postmarked by April 1, 2023
- Please mail all of your application materials in one packet
- Letter of Recommendation and Academic Transcript must be in separate sealed envelopes and must be included inside your application mailing packet – separate mailings will not be considered
- Please use the checklist on the application information page to be sure that you have all of the required materials
- Please print your pages single sided
- Do not submit any unrequested materials – they will not be considered

Mail your completed application by April 1, 2023 to:

**Cut Out Cancer Inc
C/O Ronit Shoham
44 Ferncliff Drive**

West Hartford, CT 06117-1014

For further information or if you have questions, please email cutoutcancer@gmail.com