

Scholarship Renewal Application Form

Applicant (Child/Student) Information

Applicant's Name: (F) (M) (L)

Applicant's Address:

City: State: Zip:

Applicant's Phone (Cell/Work/Home):

Applicant's Email:

Date of Birth (MM/DD/YYYY):

Applicant – School Information

Current School

Attended/Attends:

School Address:

City: State: Zip:

Essay

As a returning scholarship recipient, we would simply like to know if there have been any changes to:

- Your academic goals
- Your financial needs
- Your family situation

If there have been changes, please provide that information below.
(If there are no significant changes, you may simply state “No changes at this time.”)

We would also love to hear how your studies are going overall. If you would like, please share a brief update about:

- A class you’re enjoying
- A recent accomplishment
- A challenge you’ve overcome
- An internship, job, or campus involvement
- Anything you’re proud of this year

(This is optional, but we truly enjoy hearing how you’re doing.)

By my signature below, I declare under penalty of perjury that the foregoing statement(s), including my accompanying statements and/or documentation, is to the best of my knowledge and belief, true, correct and complete.

Signature:

Date:

Please note: Applicants are only considered submitted when all required documentation has been received by Kids’ Chance of Oregon, Inc. A completed application includes:

- This Form
- Updated essay section
- Transcript and/or Letter of Good Standing sent to Kid’s Chance of Oregon