



2009 SCHOLARSHIP APPLICATION

5th Annual Page's 5K Run | Sunday, October 4, 2009 | Potomac, MD

2009 Scholarship Application

College Scholarships Awarded to CF Patients
Sponsored by Page's Memorial Foundation

The scholarships will be awarded to the recipients at:

5th Annual Page's 5K Run
Sunday, October 4, 2009
Churchill High School
Potomac, Maryland

Winners must have a copy of a college acceptance letter or a documentation of enrollment. Scholarships that are awarded will be forwarded to the winner's selected school during the Fall semester.

The application and personal statement must be submitted by September 1, 2009 to:

Page's Memorial Foundation
C/o Jane Whetsell
10901 Tara Road
Potomac, MD 20854
or sent via e-mail to:
sharleh@comcast.net



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Requirements

1. You must be a current High School senior, college-bound student, or currently enrolled in college
2. You must complete the scholarship application in full
3. You must provide a proof of illness through a letter from your physician (on letterhead) confirming CF diagnosis
4. You must provide documentation of academic achievement/transcript
5. You must have a minimum 2.5 G.P.A.
6. You must include two letters of recommendation (non-family)
7. You must complete one of the essay questions found in this packet.
8. You must complete the scholarship statement provided in the next page.

Page's Scholarship Application Form

Personal Information:

First Name: _____

Last Name: _____

Date of Birth: _____

Gender: Male _____ Female _____

Contact Information: _____

Email address: _____

Please Note: Upon reward of scholarship, applicant must provide Page's Memorial Foundation with their Social Security Number.



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Candidate Education

High School: _____

Location: _____

Dates Attended: _____

Overall G.P.A. _____

Undergraduate College: _____

Dates Attended: _____

Overall G.P.A. _____

Declared major: _____

Name of College: _____

Have you been accepted? yes no

Scholarship Statement:

Discuss your extra curricular community, or other activities in order of their importance to you. Indicate the dates you participated in the activity, position held and the number of hours per week you spent on each activity. Include your post graduate plans and how you will use this educational award.

Recipient Name Usage Permission (Please select one and sign below)

I give permission to Page's Memorial Foundation to use my name if I am awarded a scholarship from the organization.

I do NOT give permission to Page's Memorial Foundation to use my name if I am awarded a scholarship from the organization

Signature: _____ Date: _____



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Essay Question

(Select **ONE** of the following)

Please limit response to no more than 2 pages in Times New Roman 12 point font.

1. What advice would you give medical personnel (Doctors, nurses, therapists, etc.) that might help patients with cystic fibrosis during hospital stays or therapy treatments?
2. Choose the one extra curricular activity you listed above as most important to you and tell why it is significant.
3. Write a letter to a government official stating why state and federal funding should be allocated to research about cystic fibrosis.

(please attach your essay)