

THE NATIONAL CHILDREN'S CANCER SOCIETY



Beyond the Cure Scholarship

The National Children's Cancer Society (N.C.C.S.) was established in 1987 to improve the quality of life for children with cancer by promoting children's health through financial and in-kind assistance, advocacy, support services and education.

In order to meet the specific needs of childhood cancer survivors, the N.C.C.S. developed the Beyond the Cure (BTC) program. The mission of BTC is to help childhood cancer survivors integrate the cancer experience into their life, ensure they have access to quality survivorship information, encourage advocacy and celebrate survivorship. By providing assistance, support services and education, the N.C.C.S. has been successful in its efforts to improve the quality of life for children with cancer.

The BTC scholarship program advances the mission of the N.C.C.S. of improving the quality of life for children with cancer by improving the capacity of childhood cancer survivors to attend college. The N.C.C.S. will award stipends of **up to \$5,000 per academic year** to college bound or enrolled cancer survivors who have illustrated the ability to overcome the difficult challenges of childhood cancer with determination and motivation. The N.C.C.S. has limited resources available and a limited number of applications will be approved. Applications must be received by 4:30 p.m. Central Time on Wednesday April 30, 2008 and recipients will be selected and notified by Monday June 30, 2008. The amount of resources made available to the committee is also a factor and the final decision will be based on the committee's subjective interpretation of the application. All decisions of the BTC scholarship committee are final and non-appealable.

Eligibility Requirements

Applicants must be:

- ✓ Childhood cancer survivor under the age of 25 and diagnosed before the age of 18.
- ✓ Citizen of the United States.
- ✓ Accepted into an accredited educational institution in the fall of 2008.

Eligible applicants must satisfy the below requirements in full.

- ✓ Complete the BTC Scholarship application in full.
- ✓ Write an original 1,000 word essay related to the questions listed on the application that reflects the courage and determination they demonstrated through their cancer experience and how it impacts their life today.

- ✓ Submit a copy of an acceptance letter from the college, university or vocational/technical school you are planning to attend if you are an incoming freshman.
- ✓ Submit written documentation from your treating physician confirming a cancer diagnosis and treatment.
- ✓ Provide two letters of recommendation.
- ✓ Applicant must provide an official high school and/or current college transcript with official seal.
- ✓ Complete a brief summary of community service.
- ✓ In 75 words or less tell us what this scholarship would mean to you.
- ✓ Must complete financial form that demonstrates financial status and include a copy of the first two pages of tax return.

To apply for the Beyond the Cure scholarship:

Complete the application form and submit all required materials by April 30, 2008.

Incomplete or late applications cannot be considered. Applications should be mailed to:

**The National Children's Cancer Society
Beyond the Cure Scholarship
One South Memorial Drive, Suite 800
St. Louis, MO 63102**

Criteria Used to evaluate the applications:

Applications that meet eligibility requirements and are received on or before April 30, 2008 will be reviewed by the BTC scholarship committee. This committee will be responsible for choosing the recipients based on:

- ✓ Medical history
- ✓ Courage, determination and educational goals
- ✓ Commitment to community service
- ✓ Financial Status

The evaluation committee is interested in the candidate's educational and career plans, life philosophy, community service, motivation and determination that will be reflected in the essay that is requested.

Renewal of Scholarships:

Applicants awarded scholarships are eligible to reapply up to a total of four years including the initial academic year the scholarship was awarded. Renewal applicants must submit a new application each time they reapply. This award is neither automatic nor guaranteed.

BTC Scholarship recipients must:

- ✓ Maintain an overall 2.5/4.0 GPA.
- ✓ Maintain full-time status defined as at least 12 units per semester or quarter. A note from the doctor is required if the candidate is unable to maintain a 12 unit schedule.

- ✓ Provide updates on their progress at least two times during the school year- December and June. Ongoing communication would be appreciated but not required.
- ✓ Complete 10 hours of volunteer work with the N.C.C.S. which may include:
 - Participating in an N.C.C.S fundraising event in your community.
 - Volunteering on the N.C.C.S. online community.
 - Acting as an N.C.C.S. spokesperson.
 - Contributing to print material of the N.C.C.S.

How funds will be dispersed:

The scholarship amount awarded will be paid in equal amount per semester directly to the college, university or vocational/technical school for the purpose of defraying tuition and additional fees, books or supplies. Awards must be used during the academic year in which they are granted. Any unused funds are to be returned to the N.C.C.S.

Questions:

If you should have any additional questions, please contact Pam Gabris, RN, BSN, Coordinator for Beyond the Cure at 1-800-532-6459 or pgabris@children-cancer.org.

Please no calls to N.C.C.S. about awardee decisions!



2008-2009 Beyond the Cure Scholarship Application

All sections **MUST** be completed in order for your application to be considered. This form by itself is not a complete application package. Carefully check each section to make sure you are providing the requested information.

All applications must be received no later than April 30, 2008.

Late or incomplete applications will not be considered

1. Applicant (Please type or print clearly)

Last Name First Name Middle Initial M F
Sex (circle one)

() ()

Home Phone Cell Phone (if available) E-mail

Street Address

City State Zip

Date of Birth Social Security Number

Are you a U.S. Citizen? Yes___ No___

2. School Information

You must submit an official transcript(s) showing final grades for all courses taken from 9th grade to your present or most recently completed semester (high school and college). These documents must be included in your application package and **MUST** have signature and/or school seal. Unofficial transcripts will not be accepted.

Current School

School Name School District (Public School only)

() ()

School Phone School Fax (if Available)

School Street Address

City State Zip

Other Schools

Please list all other secondary (high school) and post secondary (college/university) schools attended.

Dates enrolled	School	City/State	Grade(s) attended
----------------	--------	------------	-------------------

Dates enrolled	School	City/State	Grade(s) attended
----------------	--------	------------	-------------------

Dates enrolled	School	City/State	Grade(s) attended
----------------	--------	------------	-------------------

3. Cancer Diagnosis

A letter from your oncologist confirming your cancer diagnosis **MUST** accompany your application packet. The letter should be on your oncologist’s letterhead and include:

- When you were diagnosed.
- Type of cancer.
- Include date of last treatment and whether or not treatment is completed.
- Include oncologist’s signature and daytime telephone number.

Provide the following information about your oncologist writing to confirm your cancer diagnosis.

Name		Title	
	()		()
Affiliation (hospital or otherwise)	Phone		Fax

4. Reference Letters

Submit two letters of recommendation (*Maximum 300 words*) from a non-related person such as: teacher, coach, community leader or medical professional. Letters must include how long and in what capacity you have known the applicant, general impression of the applicant and in your opinion, has the candidate demonstrated courage and determination to meet the challenges of childhood cancer and have you observed any changes in there life from the impact of this experience. Have each reference include their name, address and phone number within the letter. Letters will become the property of The National Children’s Cancer Society and be used for future publications if scholarship awarded.

Please include the contact information of the individuals who are writing letters in support of your application.

1.

Name		Title	
	()		()
Affiliation	Phone		Fax

2.

Name		Title	
	()		()
Affiliation	Phone		Fax

5. Essay

The essay (*Minimum 1,000 words*) should be typed, responding to both questions listed below, submitted with the candidates name on each page. The essay will become the property of The National Children’s Cancer Society and be used for future publications if scholarship awarded.

- What did you learn from your cancer experience and how did it impact your future?
- As a childhood cancer survivor, what advice would you give other children who are currently facing the challenges of a cancer diagnosis?

Expressing your honest thoughts and feelings can be helpful to others. Think about what helped you the most or what would have helped.

6. Community Service

Please list any community service you were involved with and the dates in which you participated.

7. College or University

Please submit the name of the college, university or vocational school you will be attending in the fall of 2008:

Are you currently accepted for admission? Yes__ No__

If not, when do you expect to be notified of acceptance? _____

If yes, Please provide a copy of acceptance letter.

___By initialing here you are giving us authorization to share scholarship information with the institution listed.

Potential area of study _____

How did you learn about the Beyond the Cure Scholarship program? _____

8. Quote

In 75 words or less tell us what this scholarship would mean to you.

9. Submission Requirements

Individuals who receive a BTC scholarship will be required to submit a photo.

___ Initial here to authorize release of your name, photo and essay/ letters/ story for use on The National Children’s Cancer Society’s promotional material and website.

Initial below that you have read and agree with the following statement.

The applicants understand that the grant of the scholarship is subject to interpretation of the applications in the sole discretion of the committee and the extent by which the program is funded. The amount of funding will be discretionary with the management of N.C.C.S. The decision of the committee is final and may not be appealed, and the program administrator shall make all decisions regarding compliance with the requirements after a scholarship has been awarded. The applicant agrees to be bound by any such decision without appeal.

Parent/Guardian _____

Applicant _____

We require signatures from both the applicant and a parent or guardian to certify that all statements contained in the application are true and the essay submitted was written by the applicant. The applicants by their signatures hereon acknowledge that they have read and understand all of the rules and requirements and agree to be bound by them.

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

**Beyond the Cure Scholarship
Financial Need Form**

Full Name _____

Applicant Name _____

Relationship(s) to Applicant _____

Information from either your 2006 or 2007 tax returns may be used.

Current Income

1. What was your adjusted gross income for 2005/2006? \$ _____
Noted on: AGI is on IRS Form 1040-line 33;
1040A-Line 19; 1040EZ-Line 4; Telefile-Line 1

2. At this time, what is the current total balance of your \$ _____
savings and checking accounts?

Expenses

1. What is your monthly mortgage/rent payment, \$ _____
Include utilities and phone?

2. Do you have any other monthly debts or obligations \$ _____
such as credit card debt, loans, insurance or car
payments?

3. List the total amount of out of pocket medical \$ _____
expenses not covered by insurance you paid in the
past year.

Projected School Cost

1. How much will you be contributing to the applicant's \$ _____
educational expenses?

Please sign to certify that all information on this form is true.

Signature: _____ **Date:** _____

Parent/ Guardian Signature: _____ **Date:** _____

(if applicant is under 18 years of age)

Make a copy of this form if needed and submit completed form with the BTC scholarship application on one package.

Beyond the Cure Scholarship

Check List

ONLY COMPLETE APPLICATION PACKAGES WILL BE CONSIDERED

- ___ Complete and sign Application Form. (include applicant and parent/guardian signatures)
- ___ Include a copy of an official transcript(s) showing final grades for all courses taken from 9th grade to your present or most recently completed semester (high school and college). These documents must have a signature and/or school seal. Unofficial transcripts will not be accepted. Also, if applicable, please provide a copy of your collegiate acceptance letter
- ___ Include hard copy of essay (Minimum 1,000 words) answering the questions provided.
- ___ Include a letter of recommendation (Maximum 300 words) from two individuals who are not related to you and have them include their name, address and phone number.
- ___ Include financial need form.
- ___ Please print your name clearly in the top right hand corner of each page of the application package. Do not staple pages together.
- ___ Submit the entire application package together in one envelope.

**DEADLINE – A complete application package must be received by 4:30 p.m. CT on
Wednesday April 30, 2008**

**Mail to: The National Children's Cancer Society
Beyond the Cure Scholarship
One Memorial Drive
Suite 800
St. Louis, MO 63102**