



4455 W. Lawrence St.
Appleton, WI 54914
P 920.830.1290
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cffoxvalley.org

King's Daughters Charity Circle Jamie Muoio Circle of Hope Scholarship Award

The Circle of Hope Scholarship Award is given to a graduating senior of an Appleton public or private high school or Neenah High School, who has overcome significant life challenges and is now pursuing higher education. The students will be nominated by their high school and selected by the King's Daughters Charity Circle Jamie Muoio Circle of Hope Scholarship Award committee. The scholarship will provide up to \$1,000 in tuition assistance at an eligible higher education institution (including accredited trade schools, technical colleges, colleges, or universities).

STUDENTS

To apply, please submit the following to your Guidance Office by **April 1**:

- Completed application form
- Essay addressing the question, "Describe a challenge or challenges that you have overcome and how pursuing higher education will help you achieve your goals."
- A letter of recommendation from your guidance counselor
- Copy of high school transcript

GUIDANCE OFFICE

Please forward 2 nominees completed applications along with attachments by **April 10** to:

Community Foundation for the Fox Valley Region, Inc.
4455 W. Lawrence St.
Appleton, WI 54914
Email: scholarships@cffoxvalley.org / Fax: 920.830.1293

Applications must be received via email, fax, or mail to the Community Foundation office by 4 pm on April 10. Late or incomplete applications will not be considered.

Personal Information:

Name: _____ Gender: Female Male Other

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian #1 Name: _____ Occupation: _____

Parent/Guardian #2 Name: _____ Occupation: _____

Who do you live with:
Both Parents/Guardians Parent/Guardian #1 Parent/Guardian #2 Other _____

High School you attend: _____



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Essay: Please write a short essay answering: "Describe a challenge or challenges that you have overcome and how pursuing higher education will help you achieve your goals."

Please sign below to certify that the information that you have given is complete and correct to the best of your knowledge.

Applicant Signature: _____
(Typed Name)

Date: _____