



Hero Appreciation Network

Fallen Hero Scholarship Application

Scholarships for Youth At-Risk; join the campaign.

Goal Twenty Thousand Scholarships by the end of 2007'.

Hero Appreciation Network, a 501(c) (3) nonprofit organization

www.adopt-a-hero.org/ah/scholarships.cfm

heroappreciation@hotmail.com

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To qualify for the Hero Appreciation network's \$5,000 "Fallen hero Legacy Scholarship" you must be between the ages of 14 and 21 years of age and have the desire to pursue a College or Certified Vocational Trade School education.

In addition you must fully complete the following three documents:

1. Registration Form
2. Nomination Form
3. Referral and Nominee Statement Form

Two referrals (endorsements) are required from a representative from the following group.

- 1) Law Enforcement Officer
- 2) Firefighter
- 3) Member of the Armed Services
- 4) Educator
- 5) Clergy

A \$20 processing/registration fee must accompany your scholarship application.

The Nominee's Application will be reviewed by any of various organizations or committees designated by HAN for that purpose. These groups include:

Various service organizations, i.e. Rotary Club
Clergy Councils
Military, Law Enforcement or Firefighter committees specified by HAN
Special Reviewing Committees consisting of qualified community leaders appointed and approved by HAN

The Participating Agency will review all candidate application/registration forms submitted to it. Winners are chosen in a blind selection process.

What we are looking for in a candidate is need and worthiness and a strong desire to succeed in life. Candidate must be able to qualify for admission to the school they choose but grades are not the primary criteria for selection.

Scholarships are awarded as funds become available.

If you are not awarded a scholarship immediately, your name will remain on the list (until you pass the age of 21) and you will be reconsidered as new scholarships are announced.

Please complete all forms included in this application package and return them along with \$20 for processing to:

Hero Appreciation Network
Fallen Hero Legacy Scholarship
P.O. Box 189
Simi Valley, CA 9306

Do not photocopy, fax or e-mail this application. Please take the time to fill out each form to the best of your ability. If you have any questions please direct them to:

HeroAppreciationNetwork@hotmail.com

Please note that this scholarship application is in the developmental process; changes may occur in future forms.

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REGISTRATION FORM

FALLEN HERO SCHOLARSHIP

Please register the following individual in your scholarship database for scholarship consideration. An Identification Number will be assigned to this form as a method of documenting the date and status of this registration. This is an organized way to keep track of all registrations and assure that they receive attention in the order they are received.

Name of Nominee: _____

Referred by: _____
(Organization Name) (Director's Name)

(Address) (City) (State) (Zip Code)

(Area Code & Telephone Number) (E-mail Address)

Endorsement Signature Date

Nominees must obtain two signatures from the following institutions:

Educator: _____
(Print Title and Name) (Signature)

Clergy: _____
(Print Title and Name) (Signature)

Law Enforcement: _____
(Print Title and Name) (Signature)

Firefighter: _____
(Print Title and Name) (Signature)

Member of the Armed Services: _____
(Print Title and Name) (Signature)

Hero Appreciation Network Internal Use Only:

DATE: _____

REGISTRATION ID#: _____



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NOMINATION FORM

NAME OF NOMINEE

(Last Name) (First) (Middle)

(Address) (City) (State) (Zip Code)

(Date of Birth) (Telephone Number) (E-mail Address)

(Parent/Guardian Name) (Telephone Number)

Are you currently attending school? Yes _____ No _____

Middle School _____ High School _____ Vocational School _____

(If yes, please provide school name)

(School Address) (City) (State) (Zip Code)

Graduation or Expected Graduation Date: _____

Overall Grade Point Average: _____

Name of Anticipated College/Vocational School: _____

(Address) (City) (State) (Zip Code)

Anticipated Start Date: _____

If you have not graduated from High School, please answer the following questions.

Do you have a General Education Diploma (GED)? Yes _____ No _____

Do you need financial assistance to complete your GED test? Yes _____ No _____

Would you like to attend a College/Certified Vocational Trade School of your choice?
Yes _____ No _____

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REFERRAL & NOMINEE STATEMENT FORM

FIRST REFERRAL STATEMENT: Person making the Referral must complete this section. (Please attach a brief statement (one paragraph) highlighting why this individual is nominated for the “*Fallen Hero Scholarship*” program).

SECOND REFERRAL STATEMENT: Person making the Referral must complete this section. (Please attach a brief statement (one paragraph) highlighting why this individual is nominated for the “*Fallen Hero Scholarship*” program).

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NOMINEE STATEMENT OF INTEREST: Applicant needs to complete this section. (Please attach a brief statement (one paragraph) discussing your goals and dreams for educational opportunity).

Nominee Signature

Send application consisting of (1) Registration Form (2) Nomination Form and (3) Referral & Nominee Statement to: Hero Appreciation Network Fallen Hero Scholarship, P.O. Box 189, Simi Valley, CA 93062.

Recipients of a Hero Appreciation Network "Fallen Hero Scholarship" cannot reapply in any subsequent years.

Our Educational Scholarship Director will contact nominees to provide additional information.

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HERO APPRECIATION NETWORK SCHOLARSHIPS TERMS AND CONDITIONS OF ACCEPTANCE

1. Scholarship Recipients agree to review and familiarize themselves with information about The Hero Appreciation Network prior to receiving the scholarship awarded at a public event. Information about The Hero Appreciation Network may be obtained at HeroAppreciation@Hotmail.com, from printed material available at your school or from www.HeroAppreciationNetwork.org.
2. Recipients may be interviewed by the media or asked to comment publicly at the presentation of the scholarship. Recipients shall be prepared to speak about The Hero Appreciation Network Scholarship Program. Recipients are encouraged to discuss how they intend to use their scholarship and to state their career and life goals.
3. Recipients agree to post a quarterly or end of semester update of their educational progress at least twice a year on The Hero Appreciation Network website. Scholarship recipients are encouraged to submit a current photograph of themselves each time they update their education progress.
4. Recipients are asked to encourage other potential Hero Appreciation Network Scholarship candidates to apply for scholarships via our program.
5. It is our intention, and your moral obligation, to apply this Hero Legacy Scholarship, in its entirety, toward the advancement of your higher education. All funds will be held in trust by the Hero Appreciation Network until such time as you provide proof of enrollment at the college or vocational school of your choosing. Said proof of enrollment may be in the form of:
 - (1) Verification of enrollment letter from the institution confirmed on letterhead; or
 - (2) Schedule of classes in which you have enrolled issued by the institution.Proof of enrollment shall be submitted to _____.
Hero Appreciation Network, in its sole discretion, shall determine whether any submissions for proof of enrollment are satisfactory and upon positive determination will release the total sum of the scholarship awarded to you or your chosen educational institution. In an effort to optimize distribution of scholarships, awarded scholarships must be activated by proof of enrollment within two (2) years of the date of the recipient's high school graduation. Failure to provide proof of enrollment within this allotted time period shall result in forfeiture of the scholarship award.

It is our hope that Hero Appreciation Network Scholarships will provide you and many other recipients with opportunity and motivation to succeed in life. Additionally, we are hopeful that your success will cause you to motivate others to follow in your footsteps.

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Because each scholarship is given in memory of an American hero from the ranks of the police, fire, paramedics, or military who made the ultimate sacrifice, we ask for your respect and appreciation of our scholarship heroes.

In closing, everyone associated with The Hero Appreciation Network wishes you success in achieving your personal goals. Remember that America will be the land of the free as long as it remains home of the brave.

I accept the Conditions of my Scholarship Award on this,
the ____ day of _____, 20__

Signed _____