



Leo's Love and Legacy, Inc presents the

Leo's Lions and Warriors Scholarship

General Instructions:

- This scholarship is for pediatric cancer survivors and their siblings to attend college through a diploma, certification, associate's degree, bachelor's degree or master's degree in the field of study they choose. These can include trade school, state university, private university or community colleges.
- Applicants must currently reside in Arizona and have received (or their siblings received) cancer treatments in Arizona. Plans to attend a school outside of Arizona are accepted.
- Please verify all questions are completed and accurate. Letters of recommendation will also be required and they must be completed within 1 year prior to application submittal and included in submission. Contact information for recommendation letters will be required.
- Answers will need to be legible and essay questions need to be typed. Essay questions may be attached separately if needed. Incomplete submissions will not be considered.
- Scholarships are awarded in the amounts of \$500, \$1000, and \$1500 depending on amount of applicants and quality of submissions. Scholarships will be made out to the attending school on behalf of the student for their tuition costs.
- Applications will be accepted April 1st through May 30th of each year and award notifications will occur by June 30th of each year.
- Include 2 letters of recommendation from a non-related mentor/colleague at least 18 years or older with their name and email attached for verification purposes along with your submission.
- Email completed applications to: leosloveandlegacy@gmail.com by deadline listed above.

Date _____

First set of questions below are related to the child diagnosed with cancer:

Patient Name _____

DOB _____

Date of Diagnosis _____ Diagnosis _____

Where was treatment received? _____

Length of treatment _____

Are you/they currently receiving treatment? _____

Full Name of Applicant for scholarship _____

Current Address _____

Phone _____ Email _____

Date of Birth _____

Are you a childhood (ages 0-18) Cancer Survivor or Sibling thereof ? (Circle One)

Current School you are attending or occupation ?

_____ Year in School _____

High School Graduation Date (or expected date) _____

High School Cumulative GPA _____

If in college Current GPA or write N/A _____

Plans for Education:

Name of School you plan to attend: _____

Address of School _____

Degree you are seeking _____

Career Goals _____

Will you be in school part time or full time? _____

Prior scholarships received from Leo's Love and Legacy? _____

Financial Information:

Number of people living in your household? _____

Other family members in College ? _____, How many? _____

Parent/family income for last year? \$ _____ (reference tax forms)

Medical cost incurred to family (after all insurance payments) of treatment from start to finish, this number may be estimated \$ _____

Have you been awarded other scholarships from other sources for the upcoming school Year? Please list sources and amounts if applicable _____

Essay Question #1 (500 words or less)

How has childhood cancer impacted your life?

Essay Question #2 (500 words or less)

What goals have you had for yourself for this past year and how have you accomplished them?

Essay Question #3 (500 words or less)

What goals do you wish to accomplish in the next year and what are some resources you will use to meet them? How will this scholarship impact you?

Essay Question #4 (500 words or less)

Tell us a little about yourself. What are your hobbies, extracurricular activities, community service and club involvement, or other organizational activities you enjoy? How have you positively impacted your community or surroundings?