



DENVER FIRE FIGHTERS BURN FOUNDATION, INC.
2342 Broadway, Suite 140 ■ Denver, Colorado 80205 ■ 303-297-2989

2017-2018 SCHOLARSHIP APPLICATION

In 1999, the Denver Fire Fighters Burn Foundation started a scholarship program for burn survivors to assist them in reaching their goals. Anyone who has been treated at The Children's Hospital Burn Center or has attended the Cheley/Children's Hospital Burn Camp, Winter Camp, or Project Challenge, is eligible for the national assistance program.

Applicants **must reapply each year** for this scholarship and must maintain a GPA of at least 2.0 throughout the school year. Up to ten scholarships will be awarded annually. The maximum scholarship amount is \$2,000.00. Any applicant must be pre-enrolled and accepted to a college, university, trade school, or technical school before the grants will be awarded.

Your application must be **complete** and the following items **must** be attached to your application for it to be considered:

- High school transcript/GED, including credits and GPA (if applicable) or
 - College, University, Trade/Technical school transcripts and GPA
 - 2 letters of recommendation from counselors, teachers, principal, instructors, professors
 - List of extracurricular activities (sports, community service, clubs, etc.)
 - Wallet size (2¼" x 3½") photograph (e.g. your senior picture)
- *Incomplete applications will not be considered.

To be eligible for this scholarship, applicants must have:

- Received inpatient care at The Children's Hospital Burn Center or
- Attended one of The Children's Hospital Burn Camps
- Completed high school or received a GED or be in his/her senior year at the time of application. Students enrolled in college course work are eligible as well.
- Must have applied for acceptance or accepted to an accredited college, university, trade/technical school.
- Express a need for financial assistance.
- Be a US citizen.

APPLICATION DEADLINES:

Applications must be returned to: The Denver Fire Fighters Burn Foundation, Inc.
2342 Broadway, Suite 140
Denver, CO 80205

Applications must be postmarked by **September 1, 2017**. Scholarships will be awarded before December 31, 2017.

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DATE OF APPLICATION: _____

PERSONAL INFORMATION:

Name _____ SSN _____

Home Address _____

City, State, Zip Code _____

Home Phone Number _____ cell _____

Email Address _____

College Address _____

City, State, Zip Code _____

College Phone Number _____ cell _____

College Email Address _____

PARENT'S INFORMATION:

Name _____

Address _____

Phone Number(s) _____

HIGH SCHOOL INFORMATION:

H.S. Attended _____

H.S. Address _____

Contact Person _____ Phone Number _____

Grade Completed _____ Your GPA _____ GPA Scale _____

COLLEGE, UNIVERSITY, TRADE/TECHNICAL SCHOOL INFORMATION:

Name of Institution _____

Address _____

Contact Person _____ Phone Number _____

Accepted _____ Acceptance pending _____ Year completed _____

Major _____ Your GPA _____ GPA Scale _____

ADDITIONAL SCHOOLS BEING CONSIDERED:

Name _____ Accepted _____ Pending _____

Name _____ Accepted _____ Pending _____

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Please provide a statement of financial need for the entire 2015-2016 academic year:

| | |
|--------------------|-------|
| Tuition and Fees | _____ |
| Room and Board | _____ |
| Estimated Books | _____ |
| Other _____ | _____ |
| Other _____ | _____ |
| TOTAL COSTS | _____ |

Other circumstances contributing to your need for financial assistance:

Please provide a list of any other financial assistance you anticipate receiving:

| | |
|--------------|--------------------------|
| Source _____ | Amount anticipated _____ |
| Source _____ | Amount anticipated _____ |
| Source _____ | Amount anticipated _____ |
| Source _____ | Amount anticipated _____ |

Total amount of financial assistance requested: _____

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Write a brief statement regarding your academic/career goals and how you arrived at this decision. Please confine your response to the front and back of this sheet.