In 2005, the Firefighters Burn Institute started a scholarship program for burn survivors who have participated in programs, events and/or services offered by the Firefighters Burn Institute and who were treated as an inpatient at a medical burn facility for twenty-four hours or more.

Up to four $2,000 scholarships will be awarded each year, payable in two installments. Applicant must be pre-enrolled and accepted for full-time attendance to a college, university, trade school, or technical school before any money is distributed. Recipient must maintain a minimum 2.5 GPA throughout the school year. This scholarship may be awarded to an applicant a maximum of twice.

**The following items must be submitted for your scholarship request to be considered.**

1. Completed Cliff Haskell Perpetual Scholarship application.
2. Attach official high school transcript/GED, including credits and GPA **OR** official college, university, trade/technical school transcripts and GPA.
3. Attach two letters of recommendation from any the following: camp directors or counselors, high school or college counselors, teachers, professors, principals, employers, and other program leaders.
4. Attach an essay (minimum of 500 words) addressing how being a burn survivor has changed your life **and** how the scholarship will help you achieve your personal and professional goals.

**To be eligible for this scholarship, applicants must have:**

- Completed high school or received a GED or be in his/her high school senior year at the time of application.
- Applied to or been accepted to an accredited college, university, trade/technical school on a full-time basis or be a full-time student at an accredited college, university, trade/technical school and be enrolled for the 2019 Fall Term. We will verify each recipient’s college or trade school enrollment prior to disbursement of scholarship funds.

**APPLICATION DEADLINE:**

Applications must be postmarked by **July 1, 2020**.

Mail Completed Application Package to:  Firefighters Burn Institute  Attn: Scholarship Committee  3101 Stockton Blvd  Sacramento, CA 95820
Cliff Haskell Perpetual Scholarship Application

PERSONAL INFORMATION:
Name: ___________________________ DOB _______________________
Home Address: ________________________________________________
Home Phone: (____) - _______ Cell Phone: (____) - _______
Email Address: ________________________________________________
College Resident Address (if applicable): __________________________

Please send my scholarship check to (check one):
☐ Home Address ☐ College Resident Address

PARENT’S INFORMATION:
Name: _______________________________________________________
Address: _____________________________________________________
Home Phone: (____) - _______ Cell Phone: (____) - _______
Email Address: _______________________________________________

HIGH SCHOOL INFORMATION:
High School Attended: _________________________________________
High School Address: __________________________________________
Contact Person: ___________________ Phone: (____) - _______
Grade Completed: _____________ GPA: ______________

COLLEGE, UNIVERSITY, TRADE/TECHNICAL SCHOOL INFORMATION:
Name of Institution: ___________________________________________
Address: _____________________________________________________
Contact Person: ___________________ Phone: (____) - _______
Accepted: ☐ Acceptance Pending: ☐ Years Completed: ____________
Major: __________________________ GPA: _____________
Cliff Haskell Perpetual Scholarship Application

GENERAL QUESTIONS:
Are you receiving any financial assistance from your family or requesting aid from other state, federal or private institutions (Cal Grant, Pell Grant i.e. FASFA, or other grants and scholarships)?  ☐ Yes  ☐ No

If yes, please list.

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

Please list your extracurricular activities (sports, community service, clubs, etc.). Attach additional sheet if necessary.

____________________________________________________________________________________________________

____________________________________________________________________________________________________

____________________________________________________________________________________________________

CERTIFICATION. PLEASE READ BEFORE SIGNING.
I certify that the information I have provided on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification from the Cliff Haskell Perpetual Scholarship program. If selected as a scholarship recipient, I will submit official transcripts that show each semester/quarter’s grades within 30 days of semester/quarter completion. I understand that in order to be in good standing for the scholarship, I must maintain a 2.5 GPA or higher and have full-time student enrollment status throughout each academic semester/quarter. I further acknowledge that failure to maintain at 2.5 GPA or better, and/or failure to submit semester/quarter grades on time will result in my disqualification form the Cliff Haskell Perpetual Scholarship program and forfeit of scholarships funds.

___________________________________________________            _____________________
Applicant Signature                                      Date

ATTACHMENTS REQUIRED:
• Official high school transcript/GED, including credits and GPA OR official college, university, trade/technical school transcripts and GPA.
• Two letters of recommendation from any the following: camp directors or counselors, high school or college counselors, teachers, professors, principals, employers, and other program leaders.
• Essay (minimum of 500 words) addressing how being a burn survivor has changed your life and how the scholarship will help you achieve your personal and professional goals.