



THE KYLE LEE FOUNDATION, INC.

www.kylelee28.com
e-mail: foundation@kylelee28.com



FELLOWSHIP APPLICATION INSTRUCTIONS

Please complete the attached application and enclose all required documentation as instructed. The Kyle Lee Foundation, Inc. will only consider **complete** applications. Your name must be written on each document submitted. In addition to the completed application form, the following documents must be turned in:

1. A letter from your doctor on his/her own letterhead confirming your cancer diagnosis. Letter should include a brief history of your treatment.
2. Copies of academic transcripts supporting entries on section 2 of the application, for grades 9 through 12 and college/university records, if applicable. Only copies of official documents can be accepted. Printed on-line records are not acceptable. Copies of your SAT, ACT or GRE are also required.
3. Two letters of recommendation – if requests for the letter have been submitted, pending responses, please indicate names and addresses of individuals expected to provide the recommendation (refer to section 3 of the application). Letters must be issued by someone not related to you, at least one preferably from a teacher/professor who can attest to your scholastic potential, motivation and discipline.
4. Personal Essay – refer to section 4 for specific instructions.
5. A signed waiver giving the Kyle Lee Foundation, Inc. permission to reprint your essay and your photo if you are chosen as a recipient. The essays and photos will be used in bulletins and our website to promote the foundation and provide donors with an update on the foundation's activities. See the Kyle Lee Foundation, Inc. website for an example of how we use the recipients' photos and essays.

For full consideration, the completed application form and all required attachments should be **postmarked by May 31, 2010**. Please mail the application to:

**The Kyle Lee Foundation
3843 South Bristol Street, #293
Santa Ana, CA 92704**

foundation@kylelee28.com
www.kylelee28.com



THE KYLE LEE FOUNDATION, INC.

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APPLICATION FORM FOR THE KYLE LEE FOUNDATION FELLOWSHIP

Please complete this application in full, either typing or printing the information in black or blue ink. Incomplete application packets will not be considered. All information obtained herein shall remain confidential and will only be used for reviewing eligibility. Please contact us at foundation@kylelee28.com with any questions pertaining to this form.

Application Date: _____ Scholarship for the academic year: _____

1. PERSONAL INFORMATION

Name: _____ Birth date: _____
(Last) (First) (M.I.)

Permanent Address: _____

Phone: (____) _____ e-mail address: _____

Address during school year: _____

Phone: (____) _____ e-mail address: _____

Social Security No.: _____ - _____ - _____

2. EDUCATION

Current academic status (circle one): Freshman Sophomore Junior Senior

High School

Address : _____

College

List all Colleges, Universities and Community Colleges attended (most recent first)

College/University	City/State	Dates enrolled	Degree sought	Overall GPA

College Test Scores: ACT _____ SAT _____ GRE _____
(copy of record required)

College honors or awards: _____

Extra-curricular activities: _____

3. RECOMMENDATIONS

(Attach if available. Otherwise, complete the information specified below.)

Letters of Recommendation have been requested from:

Name	Address

4. PERSONAL ESSAY

Write a short (700 words) essay outlining your goals in college and how your fight with cancer has affected your life and goals. Your statement should be typed or printed in dark ink, on a separate sheet of paper. Please attach your essay to this form.

5. AFFIDAVIT

I hereby certify that I am an eligible or current college student and a cancer survivor. I certify that this application contains no misrepresentations or falsifications and that the information given by me is true and correct to the best of my knowledge. I understand that any false statements made herein will void this application and I will be deemed ineligible for financial support from the Kyle Lee Foundation, Inc.

Signature of applicant: _____

Date: _____

Permission to use name and images for the Kyle Lee Foundation, Inc.

Rationale: The Kyle Lee Foundation, Inc. is a non-profit organization dedicated to help college-bound, cancer survivors. We do this by awarding scholarships, which are funded by generous donors. To explicitly inform our donors of our expenditure, we will publish the names of the foundation's recipients in periodical newsletters and in the foundation's website (www.kylelee28.com). We therefore need your permission to do so if you are chosen as a recipient of one of our scholarships.

Please initial the following response:

- 1) _____ I give permission to use my name and school of attendance in official Kyle Lee Foundation, Inc. newsletters and website. Note, we will maintain your privacy, and not provide any specific information, such as addresses or phone numbers.

- 2) _____ I give permission to post my picture and application essay on the Kyle Lee Foundation, Inc. website and newsletter. Please provide us with your preferred picture and/or link.

With my signature below I hereby acknowledge that the foregoing is true and correct.

Signature

Print Name

Date