**Central Pennsylvania Coalition United to Fight Cancer, CATALYST**

**2024 Scholarship Application**

**This application is to be used if you are applying for ONE of the scholarships listed below:**

* Dr. Harold A. Harvey Scholarship Award ($500)

This scholarship is named for Dr. Harold A. Harvey, a great supporter of CATALYST since the inception in 1996. He exemplifies an outstanding commitment to his patients and the community. Dr. Harvey is a Professor of Medicine at the Penn State Milton S. Hershey Medical Center in Hershey, Pennsylvania, and a member of CATALYST. The scholarship is for any high school senior living in Central Pennsylvania who has been accepted to a college or university and is going into the area of health or medicine in his/her freshman year in college.

* Esther M. Keys Davis Spirit Award Scholarship ($500)

This scholarship is named for the spirit of Mrs. Davis who survived cancer for years and was an officer as well as avid supporter of CATALYST. Esther was a motivating, enthusiastic, loving, and positive person. She always put others first and demonstrated that her reason for living was to help and serve others. Esther never accepted defeat. Her presence taught us that nothing is impossible when you have the faith and determination to fight on. This scholarship is for any current college student living in Central Pennsylvania studying in health or medicine.

* Collette V. Dickason Cosmetology Scholarship ($200)

This scholarship is named for Mrs. Dickason, a Retired professional beautician for 65 years. She is a 21-year cancer survivor and a member of CATALYST. This scholarship is for any student living in Pennsylvania and has been accepted to or is currently attending a Cosmetology School in Central Pennsylvania.

# General Instructions to Applicant

1. Applications should be submitted via website at [www.catalystpa.org](http://www.catalystpa.org) by the December 31, 2023 deadline or via email to catalystcaresforyou@gmail.com.

1. Scholarships and Awards will be reviewed and awarded on February 4, 2024 at our Annual Loving Souls and Sweethearts Cancer Education and Chronic Disease Conference. To register go to [www.catalystpa.org](http://www.catalystpa.org). Funds will be sent directly to the college or university to be applied toward tuition or fees for one academic semester or academic year. Scholarships may be awarded based on availability.

**Criteria for Selection/Considerations for selection of scholarship recipient will be:**

**1. Academic standing with the high school/college as confirmed by official transcripts**

**2. School and community service record**

**3. Financial need will be considered for selection**

**4. Two Reference Letters**

# 1. Personal Information

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| Full name of applicant |  |
| Home address |  |
| City |  | State |  | Zip |  |
| Home Phone Number |  | Cell Number |  |
| Date of Birth |  | SS#  |  |
| Name of College/University you plan to attend |  |
| Financial Aid Address of College or University  |  |
| Financial Aid Phone# of College or University |  |

# 2. Education

**a.** Name all secondary and/or technical schools you have attended in the last five years. List the school you are presently attending first.

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**b.** How many years do you plan to attend college, and what course of study would you like to pursue?

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**c.** What future business or educational career will you likely pursue after finishing college?

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**d.** What colleges have you applied to for admission? Please indicate acceptance status.

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| --- | --- | --- |
|  | **Accepted Y or N** |  |
|  | **Accepted Y or N** |  |
|  | **Accepted Y or N** |  |

**f.** List scholarships, grants, or loans for which you have applied, and check the ones you plan to use. Indicate funding amount you will receive.

**Name Plan to Use Y N Amount Plan to Use Y N**

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**3. Academic, athletic, service, and extra activities. Use additional pages or attach resume for sections 3a, 3b, and 3c.**

**a.** List academic awards, achievements, and dates.

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**b.** List participation in athletic activities.

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**c.** List participation in community service and extra-curricular activities.

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# 4. Employment History.

List jobs you have held in the last three years.

Employer/Position

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# 5. Your Expected Cost of College:

Please provide the following information for each school that you apply.

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| --- | --- | --- |
|  | *College*  | *College*  |
| *Tuition* |  |  |
| *Room/board* |  |  |
| *Books/supplies* |  |  |
| *Fees* |  |  |
| *Loans/Grants* |  |  |
| *Scholarships/Awards* |  |  |
| ***Total Annual Cost*** |  |  |

# 6. Financial Need Summary

Have you filed a FAFSA (Free Application for Federal Student Aid)? If so, did you qualify for Federal Assistance?

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**c.** Describe any special circumstances such as medical conditions, disabilities, etc. that may affect your ability to pay for your college tuition. Use additional pages if necessary.

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# 7. Reference Letters

Please provide 2 letters of reference from School, Church or Community (excluding family).

# 8. Transcript History

This section is to be completed by your principal, guidance counselor or admissions office. Attach an official transcript to this sheet.

 Ranking in class: \_\_\_\_ of \_\_\_\_\_\_\_\_\_\_ GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_ on a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ scale

Best Combined SAT Score: Verbal Math Writing

Best ACT Score: Date \_\_\_\_\_\_\_ Score \_\_\_\_\_\_\_\_\_

**Name of principal or guidance counselor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of principal or guidance counselor**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I do state the above information is accurate to the best of my knowledge.**

**Name of Applicant (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent is under 18 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

NOTE: This scholarship application form **must be submitted with required documentation** to be considered. If you are applying for multiple scholarships, a new application does not need to be completed. Only one scholarship will be awarded per recipient per academic year. Applicants and family members of CATALYST members may apply. Applicants will be notified by email.