

The Scott London/Chris Riley

MEMORIAL SCHOLARSHIP FUND, INC.



30 Othmar Street
Narragansett, RI 02882-3346

53 Dante Avenue
Johnston, RI 02919
(401) 751-5153

SCHOLARSHIP APPLICATION

TO QUALIFY: The applicants must be either past or present pediatric oncology patients or their siblings treated at The Tomorrow Fund Clinic at Hasbro Children's Hospital. All applicants must be attending college in **2019-20** and have not previously been awarded this scholarship. **Please follow the application instructions below carefully.**

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1. NAME: _____
 2. ADDRESS: _____
 3. CITY/STATE/ZIP: _____
 4. TELEPHONE NUMBER: CELL OR HOME: _____
 5. YEAR GRADUATED FROM HIGH SCHOOL: _____
 6. COLLEGE YOU WILL BE ATTENDING: _____
 7. EMAIL ADDRESS: _____

8. COPY OF COLLEGE ACCEPTANCE LETTER OR CLASS SCHEDULE FOR THE UPCOMING SEMESTER

KNOWING THAT CANCER HAS TOUCHED YOUR LIFE PLEASE WRITE AN ESSAY THAT EXPLAINS WHY ATTENDING COLLEGE IS SO IMPORTANT TO YOU. PLEASE **DO NOT PUT YOUR NAME** ON THE ESSAY, ONLY ON THE APPLICATION

THE ESSAY IS THE MOST CRITICAL ASPECT OF THE APPLICATION. IT SHOULD BE TYPED AND DOUBLED SPACED. PLEASE SUBMIT THE APPLICATION AND THE ESSAY TO THE SCHOLARSHIP

COMMITTEE NO LATER THAN **JUNE 1, 2019.**

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(751-5153)