



Supporting  
Comprehensive Health  
Care Services for Children  
with Cancer and Blood  
Disorders Since 1976

2101 Millburn Avenue  
Maplewood, NJ 07040

Tel (973) 761-0422  
Fax (973) 761-6792

[www.thevaleriefund.org](http://www.thevaleriefund.org)

# THE VALERIE FUND

## SCHOLARSHIP APPLICATION FOR RETURNING AWARD WINNERS

2022

The Valerie Fund Scholarship is a selective scholarship opportunity which grants monetary awards to current and former patients of The Valerie Fund for post high school educational expenses such as tuition and books. The scholarship program is intended to encourage current and former patients to further their education, while reducing the financial impact on their families.

**This application is only for those previous scholarship winners who apply to have their scholarship renewed for the 2022-23 school year.**

### Criteria

Renewing awards will be reviewed with an emphasis on the following:

- Academic Achievement
- Financial need

### Process

- Applications are due by **Thursday March 31, 2022** with all supporting essays, recommendations and financial information.
- The Scholarship Committee will review all completed applications and expects to send out all decisions by May 13, 2022.
- Annual awards will be paid directly to the educational institution.
- The Valerie Fund may not award scholarships to all applicants.

**For more information please call Barry Kirschner at  
973-761-0422**

# THE VALERIE FUND SCHOLARSHIP APPLICATION

## INSTRUCTIONS



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1. All renewing applicants must complete all of the following pages.
2. If you are a returning college student, you must attach a copy of your most current grades. You must also supply the first page of your parents' most recent tax return
3. **All applications are due by March 31, 2022.**
5. **Incomplete or late applications will NOT be accepted.**

Please mail completed materials to:

The Valerie Fund  
Scholarship Committee  
2101 Millburn Avenue  
Maplewood, NJ 07040

# THE VALERIE FUND SCHOLARSHIP APPLICATION

## APPLICANT

FIRST NAME		MIDDLE INITIAL		LAST NAME	
STREET ADDRESS				APARTMENT	
CITY		STATE	ZIP	COUNTY	
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female		DATE OF BIRTH /      /		AGE	
HOME EMAIL ADDRESS					
HOME PHONE NUMBER/ CELL PHONE			TODAY'S DATE		

## VALERIE FUND CENTER

NAME OF TREATMENT CENTER					
<input type="checkbox"/> NEWARK BETH ISRAEL		<input type="checkbox"/> NJ CHOP		<input type="checkbox"/> NY PRESBYTERIAN	
<input type="checkbox"/> MONMOUTH		<input type="checkbox"/> MORRISTOWN		<input type="checkbox"/> SAINT BARNABAS	
				<input type="checkbox"/> ST. JOSEPH'S	
				<input type="checkbox"/> OVERLOOK	
NAME OF DOCTOR			NAME OF SOCIAL WORKER		
DIAGNOSIS OF CANCER OR BLOOD DISORDER		ARE YOU CURRENTLY RECEIVING TREATMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		DATE OF DIAGNOSIS	

## HIGH SCHOOL

NAME OF HIGH SCHOOL		HIGH SCHOOL CITY / STATE			
GRADUATION DATE	DIPLOMA EARNED <input type="checkbox"/> DIPLOMA <input type="checkbox"/> GED		NAME OF GUIDANCE COUNSELOR		HS GPA

## COLLEGE / TRADE SCHOOL (IF ALREADY ENROLLED)

NAME OF INSTITUTION		PHONE NUMBER	<b>STUDENT # (DO NOT LEAVE BLANK)</b>
ADDRESS			
CITY	STATE		ZIP
COLLEGE CLASS IN FALL 2022? (FRESHMAN, SOPH, JUNIOR, SENIOR OR GRAD SCHOOL)	NUMBER OF PLANNED CREDITS - FALL 2022		Current College GPA

# THE VALERIE FUND SCHOLARSHIP APPLICATION

## COLLEGE / TRADE SCHOOL

PROJECTED MAJOR	
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**IF YOU ARE CURRENTLY IN COLLEGE, YOU MUST ATTACH A COPY OF YOUR CURRENT TRANSCRIPT.**

HAVE YOU RECEIVED A VALERIE FUND SCHOLARSHIP IN THE PAST?  YES  NO

IF YES, IN WHAT YEARS AND IN WHAT DOLLAR AMOUNT? \_\_\_\_\_

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# THE VALERIE FUND SCHOLARSHIP APPLICATION

## Your Financial Need for the School Year Starting Fall 2022

Current School Name \_\_\_\_\_

Name of School you plan to attend (if transferring) \_\_\_\_\_

<b>1. Total cost of attendance (tuition, fees, housing)</b>	
<b>2. Amount of scholarships/grants (not including this one)</b>	
<b>3. Amount of unmet need (subtract line 2 from line 1)</b>	
<b>4. Amount of federal student loans you plan to take</b>	

# THE VALERIE FUND SCHOLARSHIP APPLICATION

## Renewing Scholarship Essay

In order to have your renewal application reviewed, **you must submit an essay of no more than 2 pages** sharing with the committee your goals, community involvement, collegiate accomplishments, your course of study and any other information you'd like to share within this application. We love to hear how you're doing in college and beyond!

**\*In addition to your statement of financial need, you must include the first page of your parents' most recent federal tax return.**

**\*Note: Please blacken or cross out all Social Security Numbers on all tax forms.**

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### Submission Requirements

Students who receive a Valerie Fund Named Scholarship will be required to submit a high resolution photo at a later date.

Please initial here to authorize release of your name, photo, essays and story for use by The Valerie Fund for promotional purposes and on our website.

Parent/Guardian\_\_\_\_\_

Applicant\_\_\_\_\_