

Application Criteria: At least two years on Patrol

The Cody St. John Foundation, Inc.

414 Metropolitan Boulevard Pasadena, MD 21122-4170 (410) 544-8413/www.whatwouldcodydo.net

Scholarship Application Form

| Application: | | | | |
|---------------------|----------------------|-------------------|----------------------|----------------|
| Name | | | Date | |
| | ast First | Mide | dle | |
| E-mail Address | | | Date of Birth | |
| | | | | MM / DD / YYYY |
| Current Address | | | | |
| Street Address | City | State | County | Zip Code |
| Permanent Address | | | | |
| Street Address | City | State | County | Zip Code |
| Phone Number | | (| Cell Number | |
| Gender: Male / Fema | ale Country of Birth | | Country of Citizensh | ip |
| Educational Histor | y – List most curren | t school or where | you received most | recent degree |
| School | City, State | Dates of | Diploma/Degree | Area of |
| | • | Attendance | Earned | Study |
| College | | | | |
| College | | | | |
| College | | | | |
| High School | | | | |
| | | | | |
| Middle School | | | | |
| Elementary | | | | |

Employment History - List the most recent employment first

| Employer | Address of Employer | Contact Person | Position Held | Dates of Employment |
|----------|------------------------|----------------|---------------|------------------------|
| Present | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Health Care Volunteer Experiences or Observational – List most recent experience first

| Name & Address of Site | Nature of the Experience | Length of Experience |
|------------------------|--------------------------|----------------------|
| | | |
| | | |
| | | |
| | | |

Community Involvement – List most recent experiences first

| Name & Address of Site | Nature of Experience | Length of Experience |
|------------------------|----------------------|----------------------|
| | | |
| | | |
| | | |
| | | |

Essay

Essay must be typed and double-spaced. The length of the essay is at your discretion, just be sure that you have given a complete response to the topic of your choice. You may choose from <u>one</u> of the following topics for your essay:

Topic #1). While going through his belongings, Cody's sister found a drawing that he made, which now serves as the logo and mantra for his foundation. On the drawing, he wrote, "Let Us Fortunate Ones Live the Good Life." Write about what this statement means to you. Do you aspire to share this sort of philosophy with the world? How?

Topic #2). Those that were fortunate enough to know Cody St. John shared a love and admiration for him, because the way that he lived his life was an inspiration to the rest of us. Who has inspired you in your life and why? Did this person motivate you to become a Ski Patroller or pursue medical education? Elaborate.

Topic #3). Tell us about yourself: your past, your present, and your intentions for the future. What motivated you to join the Ski Patrol? What are your passions? Why is medical education important to you? What mark will you leave on those around you?

Letters of Recommendation and Personal References

List names, titles, and the affiliations of the three people whom you will ask to provide a personal reference. References should be from employers, college faculty, mentors, or others who you know on a professional or academic basis. If currently or recently employed, you should ask a supervisor for a reference. *One of these three* people will need to provide a written recommendation on your behalf. This letter of recommendation should be enclosed in a signed/sealed envelope and included in your application packet. Recommendations from family and friends are not acceptable.

| 1) | | | |
|---------------------------------------|---------------------------------|--------|-----------|
| Name/Title | Affiliation | (| Contact # |
| 2) | | | |
| Name/Title | Affiliation | (| Contact # |
| 3) | | | |
| Name/Title | Affiliation | (| Contact # |
| College, University, Institution | Address | City S | tate/Zip |
| Name of program and length of time o | f the program you are enrolling | in: | |
| Name of Program | Timeline for Program | | |
| Cost of Program (not including fees & | books): | | |
| | | | |
| Date your tuition fee is due: | | | |

Important information:

Scholarship Application Packet MUST include:

- Completed Scholarship Application with Essay
- Letter of Recommendation from Supervisor
- Photo

Scholarship Application Packet is due on or before March 1st.

Send to: The Cody St. John Foundation

ATTN: Scholarship Committee 414 Metropolitan Blvd. Pasadena, MD 21122

Scholarship Recipients will be called by March 10th. Scholarship Recipients will be announced at the annual Cody's Challenge in Steamboat Springs. Please remember all payments are made directly to the college, university or institution.

In consideration of my application for a Scholarship, I hereby grant permission to The Cody St. John Foundation, Inc. (TCSJF), its employees, successors and assigns, to reproduce, display, edit, publish and distribute, in whole or in part, the information and images provided by myself or taken by the staff or assigns of TCSJF including, without limitation, my name, biography and likeness (photographic or otherwise) in which I am featured and/or am pictured in. I also consent to such use: for website content and representation on www.whatwouldcodydo.net and any other website operated by TCSJF.

| Scholarship Applicant Signature | Date |
|--------------------------------------|------------------------------|
| | Thank you for your interest! |
| Scholarship Applicant's Printed Name | The Cody St. John Foundation |