Racing For Relief, Inc.

P.O. Box 384 St. Henry, Ohio 45883

[www.racing4relief.org](http://www.racing4relief.org)

e-mail:racing4relief@gmail.com

**2023-Racing For Relief Scholarship**

A $500 Scholarship awarded to any student attending a post-secondary education in the next year and they must be a current senior or older.

**Requirement**

* Actively involved in the Racing For Relief organization through volunteering or by participating as a team member. Involved applicants can also be a child or a sibling of a volunteer or a team member.
* Applicant volunteers in the community.

**Applicant Procedure**

* Complete and submit this scholarship application form to Attn: Scholarship Committee, PO Box 384 St. Henry, OH 45883 MUST be post marked by April 1, 2023
* Attach a short essay of 200 words or less on “How Racing For Relief has helped the community or has made an impact in your life”. Please don’t write your name on this paper.

**Use of the Scholarship**

The scholarship may be used for approved post-secondary expenses and will be reimbursed by the organization upon proof of receipt. Examples would be books, tuition, room and boards, and other related educational related expenses.

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents or Guardians \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Association with Racing For Relief \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post-Secondary or College Choice \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Major (if known) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_