

98.7 Kiss^{fm}



2010
KISS CARES
HIGHER HOPE
SCHOLARSHIP
APPLICATION



KISS CARES

The KISS CARES Foundation's mission is to enhance the well being and lifestyle of our community through outreach initiatives dedicated to the uplifting and rebuilding of our family structures, youth-oriented programs, health initiatives and financial well-being. We accomplish our mission through:

Empowering our families and communities by implementing and supporting programs that bridge the gap between parents and youth and promoting youth to make positive changes for themselves and their communities.

Encouraging our community about healthy lifestyle changes and bringing awareness to the forefront about diseases including HIV/AIDS, Breast Cancer, Heart Disease and other epidemics that are spreading throughout our generation.

Enriching the economic worth of our community through programs and initiatives that educate and inform on building our finances towards economic freedom.

KISS CARES HIGHER HOPE SCHOLAR ELIGIBILITY

All applicants must be currently enrolled high school students attending an accredited tuition based institution including any private, technical, preparatory or boarding school.

Applicants must have a current minimum GPA of a 2.5 and demonstrate leadership abilities, have accumulated community service hours and are active participants in extracurricular activities.

Eligible students must submit a complete application and attach all of the required documentation for consideration.

Applicants must be legal U.S. residents residing, or attending school in New York, New Jersey, or Connecticut and must demonstrate financial need.

SCHOLARSHIP TERMS & CONDITIONS

The KISS CARES Scholarship Fund awards each recipient with \$1,000.

High school enrollment verification is required and scholarship funds will be paid directly to the institution in which the student is enrolled. Scholarship funds will NOT be paid directly to an award recipient.

Scholarship recipients may not be employees, partners, sponsors, or family members of the aforementioned of Emmis Communications.

SUPPORTING DOCUMENTS

All applicants must provide:

- A current, certified high school transcript that contains a current GPA and class rank.
- A 1 page personal statement essay that provides information about their community involvement and/or personal/academic accomplishments.
- One letter of recommendation from the applicant's teacher, counselor, or school official and one letter of recommendation from a personal reference.

SUBMISSION OF APPLICATION

All completed applications must be postmarked by April 30, 2010. Incomplete applications will not be considered. Applications must be sent to:

98.7 KISS FM
KISS Cares Scholarship Program
c/o Kharisma Mitchell
395 Hudson Street, 7th Floor
New York, NY 10014



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ACADEMIC STATUS

To the best of your knowledge, please record your information in the boxes below.

Current GPA

Class Rank

High School: _____

Address: _____

City: _____ State: _____ Zip: _____

High School Counselor's Name/Number: _____

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COMMUNITY SERVICE

Below, please provide a list of any community service projects you have volunteered with. Please feel free to attach additional sheets if more space is necessary.

Name of Organization # of Hours Volunteered Contact Name/Number

1) _____

2) _____

3) _____

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EXTRACURRICULAR ACTIVITIES

Below, please include a list of any extracurricular activities you are currently, or previously participated in. Please feel free to attach additional sheets if more space is necessary.

Name of Organization Dates Participated Indicate any leadership positions held

1) _____

2) _____

3) _____

CERTIFICATION AND AUTHORIZATION

All of the information that I have provided in this application and in the enclosed documents are true and complete, to the best of my knowledge. I certify that I am currently enrolled and in good standing as a high school students for the 2010-2011 academic year. I authorize 98.7 KISS FM and the KISS Cares Foundation to use any information contained in this application for the purpose of promoting and publishing the program and personal verification.

Permission is herby given to the applicant's school officials to release all necessary school records and other requested information for consideration of the scholarship program.

By signing this application I confirm that I am entering, or currently enrolled in a accredited tuition based high school.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____