

The 15th Annual Shine A Light On Child Abuse Awards Breakfast



March 28
2013



FOSTER YOUTH SCHOLARSHIP

INSTRUCTIONS

Please use a separate nomination form for each nominee

Please attach an additional page to briefly describe why you believe this youth is deserving of a scholarship and how it will be used. You may choose to share the youth's circumstances, challenges, achievements, or character traits. The Scholarship Selection Committee is dependent on your nomination in making its determination so the more information you provide, the more informed decision they can make.

MAIL FORM & ESSAY TO:
Children's Network
Shine A Light Nominations
825 E. Hospitality Ln.
2nd Fl
San Bernardino, CA
92415-0049

FAX FORM & ESSAY TO:
(909) 383-9688

EMAIL FORM & ESSAY TO:
dmckinney@hss.sbcounty.gov

DEADLINE:
5:00 p.m. on
February 15, 2013

QUESTIONS:
(909) 383-9677

NOMINEE INFORMATION *(Please print or type)*

NAME: _____

PARENT/GUARDIAN NAME: _____

HOME ADDRESS: _____

TELEPHONE: _____ EMAIL ADDRESS: _____

AGE: _____ HIGH SCHOOL: _____

NOMINEE INFORMATION *(Please print or type)*

NAME: _____

AGENCY/ORGANIZATION: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL ADDRESS: _____