



**Lawrence P. Cohen Memorial Scholarship Foundation**

**Scholarship Application**

**Applicant Information**

**Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Academic Information**

**High School:**

\_\_\_\_\_

**Graduation Date:** \_\_\_\_\_

**Current GPA:** \_\_\_\_\_ (on a \_\_\_\_\_ scale) **YOU MUST PROVIDE A CERTIFIED SCHOOL TRANSCRIPT**

**College / University Attending:** \_\_\_\_\_

**Intended Major / Field of Study:**

\_\_\_\_\_

**Scholarship Applying for (I.E.P or Survivor):**

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**Cost of School Per year, including Room and Board:**

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**Current Aid, Awards, Loans, and Amounts**

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**Family & Background Information**

Please briefly describe your family background and any circumstances that have significantly influenced your educational journey (if additional space is needed, please attached supplement page).

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**Personal Statement – Resilience & Perseverance**

The Lawrence P. Cohen Memorial Scholarship Foundation supports students who demonstrate resilience, perseverance, integrity, and a commitment to growth in the face of adversity for Students that were affected and survived pediatric cancer or overcame learning disabilities with aided by an individual education plan.

Please respond to the following:

- Describe a significant challenge or hardship you have faced and how you worked to overcome it (during your years of education supported by your I.E.P. or during your pediatric cancer treatment).

- Share a moment when you demonstrate perseverance despite obstacles or setbacks during that time period.
- Explain how adversity has shaped your character, values, or goals then and now and what it will mean to your future to be awarded this scholarship.
- Describe how you plan to use your education to positively impact others or your community that have had to overcome similar obstacles in order to further their education.

**Community Involvement & Leadership**

Please list any extracurricular activities, volunteer work, employment, leadership roles, or community service.

**Organization / Activity Role Dates Hours (approx.)**

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**Financial Considerations**

While financial need is **not the sole factor**, it is considered.

Please briefly describe your financial circumstances and how this scholarship would assist you in achieving your educational goals.

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**Letter(s) of Recommendation**

Please submit two letters of recommendation from individuals who can speak to your character, resilience, work ethic, or leadership (e.g., teacher, counselor, employer, coach, community leader). These letters can be sent under separate cover, but your application will not be fully completed without them.

1. **Recommender Name & Title:** \_\_\_\_\_  
**Relationship to Applicant:** \_\_\_\_\_
2. **Recommender Name & Title:** \_\_\_\_\_  
**Relationship to Applicant:** \_\_\_\_\_

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**Applicant Certification**

I certify that all information provided in this application is true and complete to the best of my knowledge. I understand that providing false information may result in disqualification.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_