

FOUNDERS AWARD NOMINATION FORM
(Closing Date – February 20, 2012)

Applicant must be in the 9th grade in September 2011

APPLICANT'S NAME: _____
(First) (Middle) (Last)

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TELEPHONE: _____

EMAIL: _____

EMAIL (Parents) _____

DATE OF BIRTH: _____

APPLICANT'S SCHOOL: _____

SCHOOL ADDRESS: _____

PARENT/GUARDIAN (S): _____

ADDRESS: _____

**(If different from
applicant)**

SECTIONS 1 THROUGH 5 TO BE COMPLETED BY THE APPLICANT

1. **School Activities: List all your school activities for the last 2 years up to and including the current year.**

	ACTIVITY	POSITION HELD
2011-2012		
2010-2011		
2009-2010		

2. **Community Activities: List all your community activities outside of school for the last 2 years up to and including the current year.**

	ACTIVITY	POSITION HELD
2011-2012		
2010-2011		

2009-2010		

3. Awards: List any awards received in the last 2 years. Include date.

4. Other: Describe any other skills or interest not mentioned above i.e. jobs, athletics.

5. Essay: Applicant, please attach a typed original essay (maximum of 500 words) on the following subject:

Identify a person, other than a relative, who has had a significant influence on you and describe that influence.

SPONSOR'S RECOMMENDATION
Must be completed by the school or organizational sponsor

**The Founders award was established to recognize good citizenship, community spirit
and leadership potential in young women.**

Describe why this applicant should receive a Founders Award:

Print Sponsor's Name/Title: _____

Sponsor's Signature: _____

School/Organization: _____

Address: _____

Phone: _____

**How long have you known
the applicant?** _____

**Principal's
Name:** _____

School: _____

Address (if different from above)

**COMPLETED APPLICATION MUST BE RECEIVED BY
FEBRUARY 20, 2012
The Emergency Aid of Pennsylvania Foundation, Inc.
221 Conestoga Road #300 - Wayne, PA 19087
Telephone: 610-225-0944
Email—eapa@erols.com**