



*Audrey B. Mastroianni Scholarship
Application 2009*

PLEASE COMPLETE AND RETURN WITH OTHER APPLICATION MATERIALS*

APPLICANT NAME: _____

PERMENENT MAILING ADDRESS & PHONE NUMBER _____

E-MAIL ADDRESS: _____

MALE: _____ FEMALE: _____ DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER: _____

U.S. CITIZEN: YES ___ NO ___ IF NO, ARE YOU A U.S. RESIDENT? YES ___ NO ___

IF NO, PLEASE LIST STATUS: _____

TOTAL HOUSHOLD INCOME/ YEAR: _____

HOW MANY PEOPLE DOES THIS SUPPORT? _____

HIGH SCHOOL _____

YEAR GRADUATED _____ GPA _____

UNDERGRADUATE COLLEGE/ UNIVERSITY _____

MAILING ADDRESS & PHONE NUMBER _____

MAJOR _____ GPA _____

YEAR IN COLLEGE, FALL '08: _____

GRADUATE UNIVERSITY (if applicable): _____

MAILING ADDRESS & PHONE NUMBER _____

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DEGREE: _____ GPA: _____

GRADUATION DATE: _____

STUDENT ACTIVITIES/ ORGANIZATIONS: _____

LEADERSHIP POSITIONS AND YEAR: _____

TOTAL FUNDS REQUESTED: _____

TOTAL FUNDS PREVIOUSLY AWARDED FOR THIS TIME PERIOD AND BY WHOM: _____

Essay:

Please tell the United Breast Cancer Foundation and myself about your experience as a young adult who has lost a parent due to breast cancer and what that entails. More importantly, please explain how you are creating direction in your life as well as what is increasingly more important to you in your life. Living in a single parent home, what and who has influenced you, inspired you and made you stronger due to all that you have endured with the loss of your parent? How does this journey of personal growth translate into your higher education goals? Essay must be at least 3 pages, double space, 12 point font, 1 inch margins. Your essay plays a large part in the determination of funding, so we request that you take it seriously.

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It was important for me to develop this program because at the time I was entering college there were no funding resources for students in my position; a student of a single family home whom experienced a vastly impacting change. I too experienced a loss due to breast cancer. From that moment on, life would never be the same. I have always remembered how important education was to my mother. I wanted to honor that for her but also for myself. Despite the adversity of adolescence and young adulthood, it was essential for me to pursue a higher education. When it came time to fund my education, I searched through the myriad of resources listing scholarships, grants and loans geared toward every type of characteristic you could think of, however I felt "left out" so to speak. I never came across funding opportunities created with my circumstances in mind. Therefore when the opportunity came, it was my utmost priority to create a college scholarship fund amongst the UBCF programs. I want to let students know that they are not alone in their pursuits despite all they have endured managing life without their mother present during their initiatives to attend college. I'm grateful to have the opportunity to help students such as you reach your goals and dreams.

Stephanie A. Mastroianni, President

Please include the following in your application package:

- ☞ Complete Application (**MUST be completed by applicant or the application will not be reviewed by the UBCF Board of Directors. This stipulation is strongly enforced.**)
- ☞ Essay
- ☞ Academic Transcript
- ☞ SAT/ACT scores
- ☞ Current resume
- ☞ Two letters of recommendation
 - ☞ One academic
 - ☞ One personal (non family member)
- Latest school invoice documenting complete tuition, room and board and balances due
- Latest copy of income tax return for financially responsible person
- Two current pay stubs/ documentation of disability for financially responsible person

ALL MATERIALS MUST BE MAILED IN A **SINGLE PACKAGE** AND POSTMARKED BY:

- **May 15, 2009 for Fall 2009**
- **October 16, 2009 for Spring 2010**

MAIL TO: UBCF COLLEGE SCHOLARSHIP FUND
223 Wall Street
Suite 368
Huntington, NY 1174

1-877-UBC-4CURE

UBCF reserves the right to use scholarship winners' name and story or parts of story in UBCF publications.

United Breast Cancer Foundation
223 Wall Street Suite 368 Huntington, NY 11743
1-877-UBC-4CURE www.ubcf.info fax 631-549-4527