

FOUNDERS AWARD NOMINATION FORM
(Closing Date – February 23, 2016)

Applicant must be in the 9th grade in September 2015
Seminars are held 3 or 4 times an academic year and service events
are offered 2 times a year. Seminars are held in the Radnor area.
(Public transportation is available)
Active Membership is strongly encouraged!

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

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

EMAIL: _____

EMAIL (Parent's): _____

BIRTH DATE: _____

APPLICANT'S SCHOOL: _____

SCHOOL ADDRESS: _____

PARENT/GUARDIAN (S): _____

ADDRESS: _____
(If different than 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
2014-2015	
2013-2014	

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
2014-2015	
2013-2014	

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 one of the following subjects:

Choice One

Please select a character from a book or play that you enjoy and discuss why you can relate to this character and what traits appeal to you.

Choice Two

If you could have lunch with anyone, living or dead, who would it be, and why?

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 than above) _____

COMPLETED APPLICATION MUST BE RECEIVED BY

FEBRUARY 23, 2016

The Emergency Aid of Pennsylvania Foundation, Inc.

221 Conestoga Road #300 - Wayne, PA 19087

Telephone: 610-225-0944

Email: eapa@verizon.net