

## **Teressa Rosalind French Foundation**

### **Military Dependent**

#### **2019 Scholarship Application**



Teressa Rosalind French was born in San Diego, California, to Vice Admiral William and Monika French. Teressa was a high school sophomore at Covenant Life School, formerly attending The Rock Academy, and active in basketball as well as most improved player in both softball and soccer. As a military child, she moved frequently with her family across the United States and overseas, living in nine different locations. She loved to travel, meet people, and learn about various cultures. Her tenderness and innate motivation to reach out to people allowed her to touch the hearts of all those around her. She was an inspiration and ambassador of goodwill for God. Our sweet angel accepted Christ and found salvation at the Rock Church in San Diego, CA, when she was 13 years old. Teressa had a wonderful sense of humor, bringing smiles and laughter wherever she went. She loved being around family. She could fix relationships through words; she was a peacemaker. Her gentle heart and care for young people made her a “Pied

Piper” of children. They flocked to her and loved her. She leaves behind on this earth to join her in heaven her parents Bill & Monika, and her brother Tom & sister-in-law Brittney. She also leaves behind countless family and friends. Teressa Rosalind French, 16, of Washington, DC entered heaven January 24, 2014.

#### Eligibility

- The applicant must be a military dependent.
- The applicant must be a full-time 9<sup>th</sup>-12<sup>th</sup> grade student at a private Christian school during the 2018-2019 school year.
- The applicant must be an established student athlete at their school.
- Academic Requirements: Student must have at least a 2.5 GPA.

#### Awards

- Scholarships will be awarded on the basis of school, community, and church involvement.
- The foundation will pay awards directly to the school that the scholarship recipient is attending.
- Awards will be paid in a single installment.

#### Instructions

- The entries on the application form must be complete, accurate, and legible. They must be completed and submitted to [teressafrenchfoundation@gmail.com](mailto:teressafrenchfoundation@gmail.com) by **April 1, 2019**.
- Fill in all information requested. If the answer is “none” or “not applicable,” please explain.
- Review the form for completeness and all answers for correctness. Use this year’s current form. Do not send transcripts or copies of awards. Provide only the information requested.
- Most of the form can be completed within the document. Click in the fields as required and complete your information.
- Sign the application form in all appropriate places.
- If scholarship applicant is under 18 years of age, all forms must be signed by a parent or guardian as well as the applicant.

**\*\*There are five (5) items required for application consideration\*\***

1. \_\_\_\_\_ Completed Application (Part I-III)
2. \_\_\_\_\_ Essay (Part IV)
3. \_\_\_\_\_ A Letter of Recommendation from a Teacher, Coach, Counselor, or Church Official (Part V)
4. \_\_\_\_\_ Signed Privacy Statement (Part VI) (Printed, Signed, and Emailed)
5. \_\_\_\_\_ School Verification Form (Part VII) (Printed, Signed, and Emailed)
6. \_\_\_\_\_ Military Verification Form (Part VIII)

For any questions, please email the TRFF Scholarship Chairman at [teressafrenchfoundation@gmail.com](mailto:teressafrenchfoundation@gmail.com)

Last Name, First Name: Last Name, First Name

**Teresa Rosalind French Foundation  
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**PART I: APPLICANT INFORMATION**

1. Applicant's Name: Name
2. Address: Address  
City: City State: State Zip: Zip
3. E-mail Address: Email Address
4. Home Phone Number: (999)999-9999 Cell Phone Number: (999)999-9999
5. Gender (Check):           Choose an item.
6. Name of current High School: Name  
Address: Address  
City: City State: State Zip: Zip

**PART II: PARENT/GUARDIAN INFORMATION**

1. Name of Parent/Guardian: Name
2. Relationship to student: Relationship
3. Parent/Guardian's Information:  
Address: Address  
City: City State: State Zip: Zip  
Home Phone Number: (999)999-9999 Cell Phone Number: (999)999-9999

Last Name, First Name: Last Name, First Name

**PART III: HONORS AND EXTRACURRICULAR ACTIVITIES**

**Honors:** Briefly list any academic distinctions or honors you have received since entering the 9<sup>th</sup> grade, including school, church, and community. Please place an “X” under which grade you participated in the activity or organization listed.

<i>Grade Level</i>				
9	10	11	12	<i>Academic Distinctions</i>
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.

**Extracurricular:** Briefly list your extra-curricular activities (clubs, performing arts, athletics, church, civic, etc.). Include specific events and/or major accomplishments such as musical instrument played, varsity letters earned, etc. Begin with any leadership positions that you have held.

<i>Grade Level</i>				
9	10	11	12	<i>Extracurricular Activities</i>
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.

**Service/Volunteer Experience:** Briefly list your involvement in church and community organizations.

<i>Grade Level</i>				
9	10	11	12	<i>Service Activities</i>
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.
–	–	–	–	Click here to enter text.

**PART IV: ESSAY**

In a separate document, please submit a typed essay (no more than 500 words). Your essay should explain how Christian education, athletics, and community service have impacted your life. Provide at least one example of a specific event or experience which helped to shape your character.

**PART V: LETTER OF RECOMMENDATION**

Include a one-page letter of recommendation from one of your high school teachers, counselors, coaches, principals, or church officials who is not a relative. Letters of recommendation should include examples of personal achievements which serve to illustrate both your character and demonstrate how you embody the spirit of the Teresa Rosalind French Foundation (TRFF) – selfless love for God, family, and community.

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**PART VI: PRIVACY STATEMENT – PRINT, SIGN, AND EMAIL**

To be printed and filled out by the applicant and designated parent or guardian, and emailed to [teressafrenchfoundation@gmail.com](mailto:teressafrenchfoundation@gmail.com) no later than 1 April 2019.

We certify that this application and all supporting documents, to the best of our knowledge, are complete and accurate. We further understand that all monies awarded will be used for tuition only. We further understand that the information in this application is exclusively for the use of the TRFF scholarship selection committee, and will not be shared with other individuals or agencies without my consent. We also agree that, if the applicant is selected as a recipient, any and all information submitted with this application may be used for purposes of news and publicity by the TRFF scholarship program and all current and future promotions of this program.

Applicant's Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Parent/Guardian's Name Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

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**PART VII: HIGH SCHOOL VERIFICATION FORM – PRINT, SIGN, AND EMAIL**

To be printed and filled out by the applicant's school and emailed to [teressafrenchfoundation@gmail.com](mailto:teressafrenchfoundation@gmail.com) no later than 1 April 2019.

Applicant's Name: \_\_\_\_\_

High School: \_\_\_\_\_

Cumulative GPA through mid-term of this year: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of person completing form: \_\_\_\_\_

Name and title of person completing form: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Last Name, First Name: Last Name, First Name

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**PART VIII: SPONSOR INFORMATION and Verification** *(Parent, stepparent, or legal guardian through whose military service qualification is claimed)*

1. Name of Sponsor: \_\_\_\_\_

2. Home Address of Sponsor: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Current or Last Rate/Rank Held: \_\_\_\_\_

4. Name of Current Duty Station (if applicable): \_\_\_\_\_

5. Address of Duty Station (if applicable): \_\_\_\_\_

6. Work Phone Number: (\_\_\_\_\_) \_\_\_\_\_

7. Date of retirement or death (if applicable): \_\_\_\_\_

8. Relationship of sponsor to applicant: \_\_\_\_\_

**VERIFICATION OF ELIGIBILITY INFORMATION:**

1. Please attach a legible photocopy of your state issued ID. DO NOT send a copy of your military ID.
2. Attach a legible photocopy of sponsor's NAVPERS 1070/602 or 'Page 2' or Military Service Record (DD214) or similar documentation confirming Sponsor's military status and relationship between the Applicant and Sponsor

Proof of sponsor eligibility:

Officers: Their Officer Data Card

Enlisted: The Administrative Data and Career History pages of their Electronic Training Jacket

--or--

Retirees – Photocopy of the DD 214

**\*Please block out all Social Security Numbers to protect your privacy.**