



Beau Biden Memorial Scholarship – Application

Date: _____

Name: _____ Age: _____

Street Address: _____

City: _____ Zip Code: _____

Telephone #: _____ Email: _____

Name of high school: _____

Expected date of graduation: _____

Prospective college: _____

Please attach the following along with the application:

1. In 100 words or less please describe the last gift you gave your mother¹ and why.
2. In 100 words or less please describe how your moral compass guides your life.
3. In 500 words or less, explain how you exhibit the qualities of leadership, community, civility, and respect.
4. Please attach your resume and two letters of recommendations.

Signature of applicant

Date

Applications can be sent by mail to PO Box 4406, Greenville, Delaware 19807 or emailed to info@icoulddogreathings.com.

¹ If your mother is no longer living, you may answer this question with respect to your father or grandparent.

Student Release (If 18 years of age)

If selected as an award recipient, I, _____ [Student's Name], hereby give I Could Do Great Things Foundation and its employees, representatives, and authorized media organizations permission to print, photograph, and record me for us in audio, video, film or any other electronic, digital, social, and printed media.

Signature_____

Date_____

Parental Release (If student is under 18 years of age)

If _____ [Student's Name], is selected as an award recipient, I, _____, as his/her parent or guardian, hereby give I Could Do Great Things Foundation and its employees, representatives, and authorized media organizations permission to print, photograph, and record me for us in audio, video, film or any other electronic, digital, social, and printed media.

Signature_____

Date_____