**RIGHT TO LIFE OF INDIANAPOLIS, INC.**

**JOAN BYRUM PRO-LIFE SCHOLARSHIP**

***APPLICATION FOR 2024 SCHOLARSHIP***

To be completed by applicant:

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City State Zip

Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student’s Cell: (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_

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

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

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

Phone: (\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduation Date: \_\_\_\_\_\_\_\_\_\_\_\_

College \*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check all that apply: ⁭Applied ⁭ Accepted ⁭ Enrolled

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

College Phone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Planned field of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Please list first choice college here. If you have not been accepted and/or enrolled, list other colleges where you have applied on separate paper.

I plan to attend college next semester.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICATION DEADLINE**: April 1, 2024. Applications must be postmarked no later than April 1, 2024 and mailed to:

Right to Life of Indianapolis, Inc.

Attn: Scholarship Competition

1060 East 86th Street, Suite 61B

Indianapolis, IN 46240.

Applications submitted/postmarked after the April 1, 2024 deadline will not be reviewed.

**RIGHT TO LIFE OF INDIANAPOLIS**

**JOAN BYRUM PRO-LIFE SCHOLARSHIP**

***Application Guidelines***

This $1000 Scholarship is offered annually by Right to Life of Indianapolis, Inc. to assist students who are committed to the pro-life philosophy.

The following criteria will be considered by a selection committee of judges:

1. Applicant must be a senior graduating from high school (home schooled students are eligible) in the current school year and have applied to a two or four year college and then been accepted and will enroll by May 1, 2024.
2. Applicant must have demonstrated dedicated pro-life activity and attitudes during his/her high school years and a commitment to a continued involvement in pro-life activities in college.
3. Applicant must be a resident of Marion County or any of its contiguous counties.
4. Applicant can be but is not required to be a member of a high school Teens for Life / pro-life club.
5. Applicant must provide two Recommendation Forms completed by adults (non-relatives) who are familiar with their pro-life involvement and attitudes. These could be a pastor, youth minister, pro-life club sponsor, teacher, guidance counselor or other adult familiar with the applicant’s pro-life activities and convictions.

**APPLICATION PROCESS**

A complete application is due on **April 1, 2024** and consists of:

1. A complete application form signed by the applicant.
2. An ESSAY/STATEMENT (not to exceed 2 to 3 typed double- spaced pages) from the applicant describing how specific pro-life activities during high school have affected the applicant’s beliefs and philosophy and how it relates to his/her personal life mission. Applicant should give a description of his/her commitment to continue to support life issues throughout college.
3. ACTIVITIES FORM. A complete list of activities, experiences and volunteering during high school, particularly the extent of participation and involvement in pro-life and teens for life activities, including dates, hours per week, leadership and awards.
4. TWO RECOMMENDATION FORMS (completed by two adults as explained in #5 above). Return these forms with the application in sealed envelopes signed across the seal or ask each adult to mail it directly to the RTLI office postmarked by the April 1, 2024 deadline.

**EVALUATION CRITERIA**

1. The applicant will be judged on his/her outstanding achievements in and dedication to the protection of all human life. His/her pro-life efforts can be in the area of volunteering, organizing, fundraising, advocacy, education, prayer, or service (for pregnant women and their children, the disabled or the elderly), a combination of any or all, or any other involvement that promotes the mission and goals of Right to Life of Indianapolis, Inc. **The mission of Right to Life of Indianapolis is to promote respect for the worth and dignity of all human life, including the lives of the unborn from the moment of conception, and the disabled and the elderly, until their natural death.**
2. The selection committee will consider the applicant’s participation and involvement in pro-life activities, the attitudes, abilities and leadership qualities he/she demonstrates that show a respect for all life and the commitment to continue his/her involvement throughout his/her college education.

Additional information may be requested and required from the applicant.

The $1000 Scholarship will be awarded in May 2024. The winner shall provide at that time the name of the college that he/she will be attending if not indicated and known at the time of the application.

If you have any questions please contact the

Right to Life of Indianapolis office:

Phone: 317.582.1526

E-mail: [life@rtlindy.org](mailto:life@rtlindy.org)

**RIGHT TO LIFE OF INDIANAPOLIS PRO-LIFE SCHOLARSHIP**

***ACTIVITIES FORM***

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete below a record of your participation in pro-life activities, Teens for Life club / pro-life activities, volunteer experiences, extracurricular school activities, and work experiences during your high school years. Indicate any areas of leadership or awards received if relevant. Additional pages may be added if needed. Attach your personal resume if desired.

Pro-Life/Teens for Life Activities: Dates/ Hours per Awards/Areas of

Year Week Leadership

1.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Experiences/Activities: Dates/ Hours per Awards/Areas of (Indicate if pro-life) Year Week Leadership

1.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extracurricular/School Activities: Dates/ Hours per Awards/Areas of

Year Week Leadership

1.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Experience (Optional): Dates/ Hours per Job

Year Week Responsibilities

1.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RIGHT TO LIFE OF INDIANAPOLIS PRO-LIFE SCHOLARSHIP**

***RECOMMENDATION FORM***

To be completed by pastor, principal, youth minister, Teens for Life club sponsor, teacher, guidance counselor, campus minister or other adult (not a relative) familiar with the applicant’s pro-life activities and convictions.

It is not required that all of the following areas be completed for the applicant to obtain a scholarship award, but it will be helpful in the determination of an award. Use additional pages if needed.

Name of Student Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title/Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School/Church (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_

Cell phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How long and in what capacity have you known this student?
2. Please circle the number that best reflects the student’s abilities/acknowledgements in each of the following categories.

Unable to Judge Poor Fair Good Excellent Outstanding

Pro-life Involvement unsure 1 2 3 4 5

Pro-life Attitudes unsure 1 2 3 4 5

Ability to influence others unsure 1 2 3 4 5

Leadership Qualities unsure 1 2 3 4 5

Academic Achievements unsure 1 2 3 4 5

Volunteer Service unsure 1 2 3 4 5

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (page 2)

3. What distinguishes this student’s pro-life commitment and involvement from other teens? Give specific examples of activities they organized or participated in that show this:

4. Summarize the applicant’s strengths particularly in the area of their pro-life commitment giving examples if possible:

5. Has this student demonstrated the motivation and discipline required for intellectual pursuits? Provide specific examples.

Based on your knowledge of the student, please indicate your overall recommendation for this scholarship.

\_\_\_\_\_Highly recommend \_\_\_\_\_Recommend

\_\_\_\_\_Recommend with reservations \_\_\_\_\_Cannot recommend at this time

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this recommendation/evaluation to the applicant in a business envelope with your signature across the seal prior to April 1, 2024 deadline or mail directly to the Right to Life of Indianapolis office indicated below.

**Recommendation must be postmarked by April 1, 2024**  Right to Life of Indianapolis, Inc. Questions? Contact us:

Attn: Scholarship Recommendation Phone: 317-582-1526

1060 East 86th Street, Suite 61B life@RTLindy.org

Indianapolis, IN 46240 www.RTLindy.org