

2017 STUDENTS OF THE YEAR APPLICATION

Each individual in a student pair must complete a separate application.

DUE MARCH 3, 2017



LEUKEMIA &
LYMPHOMA
SOCIETY®



CANDIDATE INFORMATION

Last Name		First		Date	
Street Address				Apartment/Unit #	
City		State		ZIP	
Cell Phone		E-mail Address			
School		Grade Level		City	
Parent/Guardian Name		Parent/Guardian Phone Number			
Parent/Guardian Email		Parent/Guardian Permission Signature			

QUESTIONS

Describe highlights of your past and current volunteer and community activities:

How might you engage your community, team and others in raising funds for LLS:

Do you have a special connection to the LLS Mission which has inspired you to seek a nomination?

REFERENCES

Please two ADULT references who can be contacted regarding this application. (Teachers, coaches, etc.)

Full Name		Relationship	
Email		Phone	
Full Name		Relationship	
Email		Phone	

If you have any questions regarding this application or the Students of the Year program, contact Natalie Minuzzo, Campaign Specialist at 707-596-5520 or Natalie.Minuzzo@lls.org

Thank you for your application! Together, we are making a difference in the fight against blood cancers. Not someday, but today.