

**The Bonnie J. Oringer '84  
Breast Cancer Awareness  
Scholarship**

**Purpose/Eligibility:**

Established by Bonnie Oringer '84 and Andrew Oringer '84, this scholarship will support an upper level student at Hofstra Law who meets at least one of the following criteria:

- Is a breast cancer survivor
- Has an immediate family member who has/had breast cancer causing a significant impact on the candidate's life
- Has demonstrated he/she is an advocate for breast cancer prevention and has devoted a substantial amount of time and effort in furtherance of the cause.

**Range of Award:**

\$2,500

*Award will be made for one academic year; not renewable*

To apply for this scholarship, please submit:

1. A completed and signed Bonnie J. Oringer '84 Breast Cancer Awareness Scholarship Application
2. A copy of your resume
3. A personal statement (please see application form for details)

All documents must be submitted as one PDF file, via email to [lawfinaid@hofstra.edu](mailto:lawfinaid@hofstra.edu),  
**no later than 5:00pm on Friday, February 2, 2024.**

*If you are unable to scan your application to be saved as a PDF file, you can download the Adobe Scan app on your phone for free. This app takes pictures and converts them to PDF files. We cannot accept pictures of the pages; all applications must be submitted as a PDF attachment in an email.*

***Note: Please be advised that students receiving a full-tuition scholarship are ineligible to apply.***

*The donors, Bonnie and Andrew Oringer, along with the Scholarship Selection Committee, which is comprised of Hofstra Law administrators, will review submissions and recommend the final candidate(s) to the Dean of the Law School, who maintains final authority regarding the final award recipient(s).*

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**The Bonnie J. Oringer '84 Breast Cancer Awareness Scholarship**

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**Personal Information**

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Hofstra Student ID: \_\_\_\_\_ Name: \_\_\_\_\_  
*Last First Middle*

Anticipated Graduation Date: \_\_\_\_\_ / \_\_\_\_\_ Program Enrollment:  Full-Time  Part-Time  
*Month Year*

Local Street Address: \_\_\_\_\_  
\_\_\_\_\_

Preferred Telephone:  cell  home (\_\_\_\_)\_\_\_\_-\_\_\_\_ Hofstra E-mail: \_\_\_\_\_

Current Residency:  On Campus  Off Campus  With Parents/Relatives

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**Financial Information**

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**Educational Indebtedness**

Total Federal Loans Borrowed to Date \$ \_\_\_\_\_

Total Private Loans Borrowed to Date \$ \_\_\_\_\_

**Total Loan Debt** \$ \_\_\_\_\_

**Resources for Current Academic Year**

Hofstra Law Merit Scholarship \$ \_\_\_\_\_

Other Scholarship/Grant Assistance \$ \_\_\_\_\_

**Total Resources** \$ \_\_\_\_\_

**Personal Statement for The Bonnie J. Oringer '84 Breast Cancer Awareness Scholarship**

Please include a statement for each scholarship (no more than 1 page) describing how you meet the specific criteria and why you are deserving of the selected scholarship. You may include any information about your personal, academic or professional goals, career plans, or community involvement that you believe would assist the scholarship committee in evaluating your application.

**Educational Background**

College/University ( <i>undergraduate</i> )	_____
Major	_____
Degree	_____
Graduation Date	_____
Post-Graduate Studies	_____
Major	_____
Degree or Certificate	_____
Date Received	_____

List any awards, honors, scholarships or special recognitions, including the year it was earned (NOT from Hofstra Law School):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any honors, academic achievements or scholarships received while attending Hofstra Law School:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Law School G.P.A. \_\_\_\_\_

List any extracurricular activities and affiliations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Note: If you need additional space for any of the requested information, please attach an extra page*

## Certification

All the information provided is complete and accurate to the best of my knowledge. I understand that all applications are confidential and will only be used for evaluating eligibility. I hereby give the Scholarship Committee permission to request verification of provided information from any source necessary to determine my eligibility. I also acknowledge that it is my responsibility to submit a complete package to the Scholarship Committee and comply with all deadlines, and that a failure to do so may result in ineligibility.

In addition, I understand that should I receive an award, there is no guarantee of renewal. I must reapply and be re-evaluated for an award each year. I also hereby give the Scholarship Committee permission, if I am chosen as a scholarship recipient to use my name and/or likeness for promotional purposes.

I understand and agree that by signing this form, I give permission to the Scholarship Committee to release information regarding my application to the scholarship donor and all applicable parties.

I understand and agree that any scholarship I may receive is non-transferable and may only be used to cover the cost of tuition and fees connected with attending Maurice A. Deane School of Law at Hofstra University. If for any reason, I withdraw from Hofstra Law or am otherwise no longer matriculated at Hofstra Law, I shall return any unused scholarship funds and shall have no claim to any undisbursed funds.

I hereby certify that I have read the application information and filled out the requested information as instructed and I understand and accept all conditions specified. I understand that falsification of information may result in automatic disqualification from this application process and eligibility in successive years, and/or in termination of any scholarship granted. All application materials become the property of the Scholarship Committee.

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**Name (printed)**

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**Signature**

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**Date**