



# CCA Memorial Scholarship Fund

Established in Honor of Kathryn Stephens  
For Gay, Lesbian, Bisexual, Transgender+ Students

## APPLICATION FORM

*All information contained in this application will be kept confidential, and used solely for the purpose of determining the eligibility of the applicant.*

### PERSONAL INFORMATION

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, \_\_\_\_\_ State, \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_

I am a: High School Senior \_\_\_\_ GED \_\_\_\_ Undergraduate Student \_\_\_\_

Next year I will be a: Freshman \_\_\_\_ Sophomore \_\_\_\_ Junior \_\_\_\_ Senior \_\_\_\_ Other \_\_\_\_

Area of Study \_\_\_\_\_

### COLLEGE INFORMATION

Education Institution Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, \_\_\_\_\_ State, \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_

**ACTIVITIES / INVOLVEMENT**

List all the community and school activities in which you have participated. Attach a separate sheet of paper if necessary.

---

---

---

---

---

List all the GLBT+ activities in which you have participated.

---

---

---

---

List any CCA activities you have participated in, or just tell us what you know about CCA.

---

---

**WORK EXPERIENCE**

Employer	Phone Number	How Long?	Position
_____	_____	___/___ to ___/___	_____
_____	_____	___/___ to ___/___	_____
_____	_____	___/___ to ___/___	_____
_____	_____	___/___ to ___/___	_____

**OBJECTIVES**

Please make a brief statement of your plans as they relate to your educational and career objectives.

---

---

---

**FINANCIAL STATEMENT**

Will you be receiving other scholarship, grants or need-based loans toward your education? If so, please indicate the dollar amounts.

---

---

---

---

---

Are there any extenuating circumstances that make financing your education difficult? Please explain.

---

---

---

---

**TRANSCRIPT**

If you are a graduating high school senior, you must include a high school transcript with this application. If you hold a General Equivalency Diploma, please include a copy of certification. If you are now enrolled as a college student, please submit your most recent college transcript.

**OTHER CONSIDERATIONS**

Please indicate any other circumstances you would like the scholarship committee to consider when evaluating your application.

---

---

---

---

---

**CERTIFICATION**

I certify that the information on this application is true and correct to the best of my knowledge.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date