



ORLANDO YOUTH ALLIANCE

Orlando Youth Alliance – The Community Gay Straight Alliance Continuing Education Scholarship

Scholarship Application

www.orlandoyouthalliance.org

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Are you a citizen of the United States? YES NO If no, where? _____

Are you a Florida Resident? YES NO If no, where? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Attachments

1. Official copy of school transcript from the Post-Secondary school (college or university) you are currently attending or Official copy of school transcript from the High School currently attending
2. Essay: 2-page, name on each page, double-spaced, 12 sized font (spelling, grammar and structure will be evaluated) to include: short biography highlighting academic success and course work, impact or experience you have had by/as a LGBTQ student, focused major or career goal, why you selected it and how you intend to use in the future
3. A letter of recommendation from faculty member, school administrator, minister, or counselor
4. Description of degree program including courses required. This should be from the University catalogue. Printed excerpts must include bibliographical reference information for the original data source
5. Current Resume

Disclaimer and Signature

Other Requirements

Completed applications must be postmarked no later than April 29. Application and application attachments are to be mailed to:

Orlando Youth Alliance
PO Box 536944
Orlando, FL 32853-6944

Recipient must be an active member of either OYA, SYA, or LYA during the time of application. Scholarship may be used for the purchase of tuition, course expenses, assessment requirements or text books. Recipient will be requested to provide documentation supporting the purchase of items listed above using scholarship funds.

The amount of scholarships awarded may be up to \$1,500.00 and will be determined by the number of chosen recipients as well as the available fundraising capabilities of the organization. All scholarship funds provided must be used within one year from the date received.

I agree that my name and any information I provide with this application may be used for the purposes of publicizing and promoting the OYA scholarship for which I am applying.

If I receive the Orlando Youth Alliance Scholarship for Continuing Education, I will enroll as a full-time (12 hours minimum) student for the Fall and/or Spring semesters of the coming academic year and take at least one course toward my declared major.

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____