FLOYD PFLAG SCHOLARSHIP

Guidelines

The Floyd PFLAG Scholarship is dedicated to celebrating and supporting the continuing education of gay, lesbian, bisexual, transgender students and their allies who exhibit courage and leadership in their schools and communities. The scholarship is funded by individual donations.

Scholarship Information

The Floyd PFLAG scholarship is in the amount of \$1000. The money must be used for educational expenses. The award will be distributed to the student upon receipt of a letter of acceptance and/or verification of enrollment.

Eligibility

- Be a resident of Floyd County, Virginia
- Be applying to attend a technical/vocational program pursuing certification OR be applying to attend a college or university pursuing an undergraduate college degree
 - Be a self-identified lesbian, gay, bisexual, transgender student or LGBT ally
 - Have demonstrated service or a desire to serve the LGBT community

Requirements

Your application and required materials are completely confidential.

They must be postmarked or submitted to school personnel by April 15th.

One letter of reference from someone other than a family member.

A signed and completed release form. A parent or guardian must sign if you are under 18 years of age.

ALL MATERIALS SHOULD BE SUBMITTED TO EITHER:

Your high school guidance counselor or administrator.

Floyd PFLAG, PO Box 766, Floyd, VA 24091

FLOYD PFLAG SCHOLARSHIP Application

Personal Data:

Student's Name (Print)		
Address		
City/State/Zip		
	Cell	
Date of Birth		
How do you identify yourse Lesbian Transgender		Bisexual Ally
	ng: n Date ol	
Name of School, City, State Name of School, City, State	ol you are applying to/plan to attend:	
What is your admission state Planning to apply Other	Applied and waiting for resp	ponseAccepted
Major intended or area of st	tudies:	
Please list involvements or	leadership roles you have had at school and	d in your community:
and should include the follow How have your experiences do to support the school en	or essay should be between 500 and 1000 wowing: How has being an LGBT Student or molded who you are today? What have youronment for LGBT students?	r Ally impacted your life?
Signature(A release form and one ref	Date: erence must accompany this application.)	

FLOYD PFLAG SCHOLARSHIP

Release Form

Please indicate "Grant" or "Do Not Grant" in each line and sign.

Please be assured that whether you grant or deny these permissions, it WILL NOT affect the outcome of your application.
On the day of(month), (year), I make the following statements of my own free will.
Signature of Student:
Print Name:
Please check as appropriate and sign by each:
I Grant I Do Not Grant (sign here:) to Floyd PFLAG permission to publish an announcement of my scholarship award in the local news media.
I Grant I Do Not Grant (sign here:) to Floyd PFLAG permission to use my photograph in their publicity releases about my scholarship award.
I Grant I Do Not Grant (sign here:) to Floyd PFLAG permission to use my scholarship essay in an anthology of stories to be compiled for publication or for promotion of the scholarship program.
I Grant I Do Not Grant (sign here:) to Floyd PFLAG permission to include my picture and bio in any and all PFLAG media.
Any comments?
*If you are under 18 years of age, your parent/guardian must sign approving your above responses.
Parent/Guardian Signature
Print Name Date
Relationship

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Reference Form

Floyd PFLAG is a chapter of a national organization founded in 1972, with approximately 250,000 members and supporters in the United States. The mission of the local chapter, one of 400 nationwide, is to educate on LGBT issues, support the LGBT community, and advocate for laws and policies which advance and protect equality for all. Floyd PFLAG is pleased to offer a \$1000 scholarship to a graduating high school senior.

You have been given as a reference by:
Reference Name (please print):
Reference Address:
City/State/Zip:
Phone: Email:
How long have you know this student: What is your relationship to this student? (teacher, administrator, minister, counselor, friend, etc
Would you recommend this student for the Floyd PFLAG Scholarship – and why? (Please use a separate sheet of paper if necessary.)
Signature Date

Please return the completed reference form by April 15th to either: The high school staff person responsible for scholarships OR Floyd PFLAG, P O Box 766, Floyd, VA 24091