Cincinnati Chapter of PFLAG

PO. Box 19634 – Cincinnati, Ohio 45219

www.pflagcincinnati.org

# 2024 Tom & Marie Jenkins Memorial

# Scholarship Award Application

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

**Applicant Information**

Please provide information where you may be reached for questions or notification.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pronouns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about this scholarship? (mark all that apply):

\_\_\_ School Counselor \_\_\_ Other School Staff \_\_\_ Friend/Family Member

\_\_\_ Scholarship Database/Website \_\_\_ Other(Describe):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requirements**

Applicants must: (a) Be a resident of or attending college in the Greater Cincinnati area, (b) Be a student (at least 17 years-old as of April 19, 2024), (c) Demonstrate positive involvement and leadership with the LGBTQ+ community, and (d) Cannot be a prior winner of this award.

Applications will be considered only if the following are **postmarked or received via online application by April 19, 2024**:

□ Completed scholarship application with personal signature

□ Your high school or GED transcripts (sent by your school) **or**

□ Your most recent college or university transcripts (sent by your school)

□ Two letters of recommendation that can speak to your LGBTQ+ involvement while also touching upon your character and academic success

The scholarship awards are a reflection of PFLAG’s commitment to a world where diversity is celebrated and all people are respected, valued, and affirmed, inclusive of their sexual orientation, gender identity, and gender expression.

The Cincinnati Chapter of PFLAG will recognize outstanding individuals who show a high level of involvement within the LGBTQ+ community while demonstrating academic success and leadership.

While PFLAG guards the confidentiality of all applicant information, our organization cannot guarantee complete anonymity. All applicants will be notified of the results at the address or phone number indicated on the application. Recipients will be announced at a PFLAG meeting, and names and information from applications, with permission, will be used in related publicity. PFLAG wishes to honor your achievements but not violate your privacy or confidences.

Agreement:

I certify that the information in my application is correct to the best of my knowledge and that I have read the above statement.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scholarship materials should be mailed to the following address:

PFLAG / Scholarship Committee

P.O. Box 19634

Cincinnati, Ohio 45219-0634

Questions?

Please call 513.284.6485 or e-mail pflagcincinnatischolarship@gmail.com.

Note: *Decisions will be made by a selection committee. All applicants will be notified as soon as possible following the application deadline. Recipients will be honored at a meeting of the PFLAG chapter in June or July 2024. Details will follow notification of recipients. Scholarship checks will be sent directly to the college or university.*

**Cincinnati Chapter of PFLAG**

**2024 Tom & Marie Jenkins Memorial Scholarship Award Application**

Please print or type your responses (Typing is encouraged).

Expand beyond the space below when needed.

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

College/University Information

Please list the name of the school you currently attend and the school you plan to attend. If you are undecided on your school, please list the schools to which you have applied. Please include your intended major and/or career field if known.

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

1) LGBTQ+ Personal Statement

Please select one of the following questions to answer:

a) How has being lesbian, gay, bisexual, transgender, intersex, or queer impacted your life?

b) How has your allyship to the LGBTQ+ community impacted your life?

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

2) Involvement with the LGBTQ+ Community

Please write in detail about your involvement and leadership with the LGBTQ+ community in your school and/or wider community. Include contributions and/or accomplishments that have made you especially proud.

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

3) Academics

Your high school and/or college transcript is included in this application. Does this academic record reflect your intellectual ability? Please elaborate.

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

4) Additional Activities

Please list work experiences, school organizations, volunteer activities, hobbies, and interests that you have not referenced in Prompt 2. Please include any leadership positions that you have held.

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

5) Significant Personal Experience

Please choose one experience that has made a significant impact on your life and explain why.

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

Additional Information (**Optional**)

Please share any additional information that would be relevant in assessing your application.