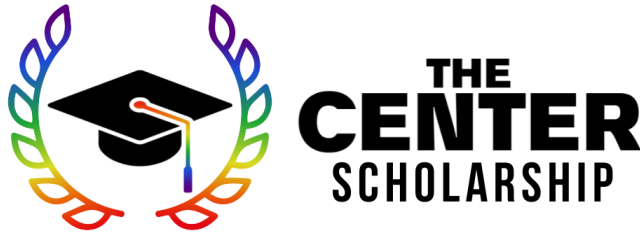




Marshall Turner

LGBT+ Center Orlando, Inc. | 946 N. Mills Ave. Orlando, FL 32803



The Center Scholarship

2023 Scholarship Application

IMPORTANT APPLICATION INFORMATION

1. DEADLINE for scholarship applications is **June 1, 2023, by 5:00pm (NO EXCEPTIONS)**
2. Incomplete applications will not be considered.
3. If any question does not apply to you in this application, please put "N/A" in the space.
4. Type or print legibly. Illegible applications will be returned to you.
5. You will be notified via email and phone no later than **June 28, 2023**, regarding the status of your application.
6. If you have any questions about the application, please email scholarship@thecenterorlando.org.

PURPOSE: To aid and empower members of the LGBT+ community and their allies seeking the advancement of their education.

SCHOLARSHIP AWARD: \$500

CRITERIA & TIMELINE

- Applicants must reside in Orange, Osceola, or Seminole County
- Applicants must currently hold a minimum weighted GPA of 2.5 on a 4.0 scale.
- Applicants must already be accepted as a student at a college, university, or trade school program for the upcoming academic semester.
- Applicants must demonstrate a need for financial assistance.
- Applicants must complete and submit a Scholarship Application by **June 1, 2023**.
- Applicants will be notified by phone and email if awarded a scholarship by **June 28, 2023**.
- Scholarship recipients will receive their check at the LGBT+ Center Diversity Lunch on **Friday, July 28, 2023**.



THE CENTER SCHOLARSHIP

APPLICATION PROCESS

SCHOLARSHIP APPLICANTS MUST PROVIDE:

- Completed Scholarship application form.
- Proof of acceptance at an academic, vocational, or technical school for post-secondary studies.
- Demonstrated financial need.

SCHOLARSHIP AWARDS

- Scholarship recipients will be notified by the Chief Executive Officer of the LGBT+ Center, Inc., Dr. George Wallace

ABOUT YOU

Please fill out the following information below. If your information will not fit, you may attach a separate sheet. If the application is illegible, it will be returned to you.

LAST NAME: _____

FIRST NAME: _____

MAILING ADDRESS:

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

DAYTIME TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

ABOUT YOUR COLLEGE/UNIVERSITY

NAME OF COLLEGE/UNIVERSITY: _____

I will be attending the above institution in the (*Please check one*): _____ FALL _____ SPRING of _____

Are you a full-time or part-time student? (*Please check one*): _____ FULL-TIME _____ PART-TIME

Do you/Will you live on campus? _____ YES _____ NO

On a 4.0 scale, what is your Grade Point Average (GPA)? _____

What is your current major? (*Please insert UND if "Undecided"*) _____



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Please list the following information on a separate sheet if needed.

SCHOOL EXTRA-CURRICULAR ACTIVITIES: Please list school extra-curricular activities in which you have participated (*IF APPLICABLE*).

- 1.
- 2.
- 3.
- 4.
- 5.

ORGANIZATIONS: Please list community organizations such as service and volunteer organizations in which you are now active or have previously had been active (*IF APPLICABLE*).

- 1.
- 2.
- 3.
- 4.
- 5.

RECOGNITIONS: Please list important awards and recognitions received (*IF APPLICABLE*).

- 1.
- 2.
- 3.
- 4.
- 5.



**THE
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SCHOLARSHIP**

NEED: In one sentence, how will The Center Scholarship benefit you?

CAREER PLANS: In a few sentences, what are your career plans and what would you like to be doing in 10 years?



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ESSAY (500-word limit):

How do you plan to give back to the LGBT+ community?



THE CENTER SCHOLARSHIP

STATEMENT OF ACCURACY

I hereby affirm that all the above-stated information provided by me to The Center Scholarship Committee is true, correct, and without forgery. I also consent that my picture may be taken and used for any purpose deemed necessary to promote The Center Scholarship Program.

I hereby understand that if chosen as a scholarship winner, according to The Center Scholarship policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before scholarship funds can be awarded.

Signature of scholarship applicant: _____

Date: _____

The deadline for this application to be received by the Center is

June 1, 2023, by 5:00pm. NO EXCEPTIONS!

COMPLETED YOUR APPLICATION?

**ONCE YOUR APPLICATION IS COMPLETED, PLEASE EMAIL THIS DOCUMENT, ALONG
WITH ANY SUPPORTING DOCUMENTS TO
SCHOLARSHIP@THECENTERORLANDO.ORG**