

PFLAG Greensboro Carter Stroupe Memorial Scholarship Guidelines for 2019

The Carter Stroupe Memorial Scholarship is dedicated to celebrating and supporting the continuing education for gay, lesbian, bisexual, transgender and LGBT allied students who exhibit courage and leadership in their schools and communities. The scholarship is funded by individual donations and the PFLAG Greensboro Carter Stroupe Memorial Scholarship Endowment. We wish to express our appreciation to the Guilford Green Foundation for their initial donation and assistance with starting the endowment and to the many individuals who have donated to the endowment.

Scholarship Information

- The PFLAG Greensboro Carter Stroupe Memorial Scholarship is in the amount of \$1,000.
- The money must be used toward educational expenses.
- Awards will be distributed to the student's educational institution upon receipt of a letter of acceptance and verification of enrollment.

Eligibility

- Be a resident of Guilford, Rockingham, Randolph or Alamance County, North Carolina.
- Be applying to attend, or currently attending a technical/vocational program pursuing certification **OR** be applying to attend, or currently attending a college or university pursuing an undergraduate college degree;
- Be a self-identified lesbian, gay, bisexual, transgender or straight ally.
- Have demonstrated service or a desire to serve the LGBT community.

Requirements

- Your application and required materials must be postmarked by **March 19th, 2019**
- A signed and completed scholarship application.
- Your high school or GED transcript (sent by your school) and/or your most recent college or university transcript.
- Two letters of reference. References should be from people other than family members.
- A signed and completed release form. A parent or guardian must sign if you are under 18 years of age.

Downloading the application

- If you wish to download this application please go to **www.pflaggreensboro.org**

All materials should be sent to:

PFLAG Greensboro
Attention: Scholarship Committee
PO Box 4153
Greensboro, NC 27404
Email: **mac.stroupe72@gmail.com**

*In addition to the PFLAG Greensboro Carter Stroupe Memorial Scholarship, you may be interested in applying for a PFLAG National Scholarship. You can find the information in the Education & Programs section on their website at **www.pflag.org**

**PFLAG Greensboro
Carter Stroupe Memorial Scholarship**

Application

Personal Data

Name (Print): _____

Mailing Address: _____

Street: _____

City / State/ Zip: _____

Email: _____

Phone: (____) _____ Cell: (____) _____

YES NO Are we permitted to leave a message at either of these numbers referencing PFLAG Greensboro or its purpose? (If NO, we will contact you via the email address provided.)

Date of Birth: _____

YES NO Are you a U.S. Citizen

How do you identify yourself: Lesbian Gay Bisexual Transgender Straight Ally

YES NO If you are LGBT, are you "out and open" in the community?

YES NO If you are LGBT, are your parent(s)/guardian(s) aware of your LGBT status?

YES NO If you are LGBT, are your parent(s)/guardian(s) supportive of your LGBT status?

If you are a graduating high school senior please complete the following.

Expected Graduation Date: _____

Name of High School: _____

City / State: _____

Name and location of school(s) you plan to attend or are currently attending:

Name of School, City, State _____

Name of School, City, State _____

Name of School, City, State _____

What is your admission status?

Planning on applying

Already Attending

Applied and waiting for response

Accepted for admission

Other _____

Current Academic Standing

Graduating HS Senior or Equivalent

College/University Freshman Sophomore Junior Senior

Other _____

Major(s) intended major(s) or area of studies:

Please list any awards, honors or recognitions you have received from your school or community.

Please list involvements or leadership roles you have had with clubs or extracurricular activities:

Essay (Your essay should be between 500 and 1000 words, preferably typed, and should integrate answers to the following.)

How has being an LGBT Student or an LGBT Ally impacted your life? How have your experiences molded who you are today? What have you done and what will you do to improve the LGBT community?

How did you hear about the PFLAG Greensboro Carter Stroupe Memorial Scholarship?

Additional Comments

I certify that the information contained in this application is true.

Applicant's Signature _____

Date _____

Note: A hard copy of this application must accompany the signed Release Form

**PFLAG Greensboro
Carter Stroupe Memorial 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: _____

Print Name: _____

(Please indicate as appropriate and sign by each).

I Grant Do Not Grant* (sign here: _____)

to PFLAG Greensboro permission to approach my school regarding recognition of my scholarship award.

I Grant Do Not Grant* (sign here: _____)

to PFLAG Greensboro permission to publish an announcement of my scholarship award and in the local news media.

I Grant Do Not Grant* (sign here: _____)

to PFLAG Greensboro permission to use my photograph in their publicity releases about my scholarship award.

I Grant Do Not Grant* (sign here: _____)

to PFLAG Greensboro 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 Do Not Grant* (sign here: _____)

to PFLAG Greensboro permission to include my picture and bio in their newsletter or on their website.

***If you do not grant one or more the above permissions, please tell us why permission is not granted.**

**If you are under 18 years of age, your parent/guardian must sign approving your above responses.*

Parent/Guardian Signature: _____

Print Name: _____ Date: _____

Relationship: _____

**PFLAG Greensboro
Carter Stroupe Memorial Scholarship**

Reference Form

PFLAG Greensboro is part of a national organization of approximately 250,000 members and supporters organized across the country, with a presence in every state, and in the Commonwealth of Puerto Rico. PFLAG Greensboro is pleased to offer the Carter Stroupe Memorial Scholarship to graduating high school seniors.

You have been given as a reference by: _____

Reference Name (please print): _____

Reference Address _____

City / State / Zip _____

Phone: _____

Email: _____

How long have you known this student? _____

What is your relationship with this student? (teacher, advisor, minister, school counselor, etc.)

Would you recommend this student for the PFLAG Greensboro Carter Stroupe Memorial Scholarship and why? (Please use a separate sheet of paper if necessary.)

Signature _____ Date _____

Please return the completed reference form **by March 19th, 2019** to:

**PFLAG Greensboro
Attention: Scholarship Committee
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