

Scholarship Opportunity!



LESBIAN, GAY, BISEXUAL, TRANSGENDER & QUEER
CAUCUS

**IF YOU CAN ANSWER YES TO THE 4 QUESTIONS BELOW
PLEASE APPLY FOR A SCHOLARSHIP**



- 1.) Do you identify as LGBTQ?
- 2.) Are you a Sacramento County resident?
- 3.) Are you enrolling, or expect to be enrolled, in an accredited college, university, technical or trade school for Fall 2020?
- 4.) Do you have a GPA of 2.0 or above?



**FOR AN APPLICATION OR QUESTIONS,
PLEASE CONTACT:**

LGBTQcaucus@saccounty.net

WE CAN E-MAIL YOU AN APPLICATION

NO INCOME RESTRICTIONS

APPLICATION DEADLINE IS April 3rd AT 5 PM

Applications can be emailed to LGBTQcaucus@saccounty.net



COUNTY OF SACRAMENTO
LGBTQ CAUCUS



The Sacramento County Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) Caucus is now accepting scholarship applications. We have included one copy of the application. Applications may be duplicated or applicants may contact us for an emailed copy.

Application deadline is 5:00 PM on April 3, 2020. Applications and essay may be submitted via email or USPS.



ELIGIBLE APPLICANTS MUST BE:

1. LGBTQ identified
2. A Sacramento County resident
3. Enrolled in a two or four-year accredited college/university/technical or trade school (acceptance letter OR proof of enrollment OR proof of application from the school you are scheduled to attend)
4. Must have a minimum cumulative GPA of 2.0

All required documentation must be provided before funds are issued. Please follow the checklist attached to the application. Please note that our scholarship is not based on any income qualifications but is intended to give LGBTQ identified students an opportunity to advance their education.

***FOR APPLICATION, QUESTIONS OR MORE INFORMATION
PLEASE CONTACT The Sacramento County LGBTQ Caucus AT:
LGBTQcaucus@saccounty.net***



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**SACRAMENTO COUNTY
 LGBTQ CAUCUS
 SCHOLARSHIP APPLICATION 2020**

Student's Name: _____
Last First Middle Initial

Address: _____
Street Apt.

_____ City County State Zip Code

Mailing Address: _____
 (If Different) Street Apt.

_____ City County State Zip Code

E-Mail Address: _____

Telephone Number: () _____ **Cell Phone Number:** () _____
 Is it okay to leave messages on this number? Yes No Is it okay to leave messages on this number? Yes No

Date of Birth: _____ **Ethnicity (Optional):** _____
Month/Day/Year

Social Security Number: _____ **Are you a U.S. Citizen?** Yes No
Are you a Legal Resident? Yes No

Gender Identity: _____ **Pronouns:** _____

Parent/Guardian Name(s): _____
 (if under age 18 on 5/1/20) Last First Middle Initial

_____ Last First Middle Initial

Mailing Address: _____
 (If Different) Street Apt.

_____ City County State Zip Code

Telephone Number: () _____

Do you identify as Lesbian, Gay, Bisexual, Transgender, or Queer? Yes No

If yes, are you out and open in the community? Yes No

Are you out and open with your parents (if under age 18 on May 1, 2020)?

Yes No

School Name: _____

Address: _____

Street

City

State

Zip Code

Counselor's Name: _____

Telephone Number: () _____

Graduation Date: _____

Cumulative Grade Point Average (G.P.A.): _____

√ **Must Include Transcripts with Application**

College / University / Trade School
Currently or Planning to Attend: _____

Have you been accepted? Yes No

Major/Course of Study: _____

Address: _____

Street

City

State

Zip Code

√ **Must Include Acceptance Letter or Proof of Enrollment with Application**

NON-RELATIVE REFERENCES:

(1) Name: _____

Relationship: _____

Telephone Number: () _____

How long have you known this person? _____ Years _____ Months

(2) Name: _____

Relationship: _____

Telephone Number: () _____

How long have you known this person? _____ Years _____ Months

√ **Must Include a Letter of Recommendation from Each Non-Relative Reference with Application**

PLEASE BRIEFLY LIST IN ORDER OF IMPORTANCE YOUR ACHIEVEMENTS AND ACTIVITIES:

For Example: School Activities /Community Involvement /Work Experience (Attach Additional Pages If Needed)

- 1) _____

- 2) _____

- 3) _____

PERSONAL STATEMENT

The LGBTQ community has made great strides toward equality and equity in the last decade however, much work is left to be done. What do you see as your generation’s most serious issue in the LGBTQ community? How do you suggest keeping this concern in the eye of the public? How do we move forward to effect change in these/this area?

Essays must be typed. All essays must be 1,500 words or more, double-spaced, 12 pt font, with one-inch margins all around. Applicants may submit additional multi-media/artistic expression pieces as well.

√ **Must Include a Typed Essay with Application**

**COMPLETED APPLICATION MUST BE RECEIVED VIA USPS or EMAIL BY
5:00 PM ON April 3, 2020**

(typed names serve as signature for application process – actual signatures will be obtained at a later date)

**MAIL To: LGBTQ Caucus
Attn: Allison Keene
4450 E Commerce Way
Sacramento, CA, 95834**

**EMAIL TO: LGBTQcaucus@saccounty.net
Subject line: Scholarship application**

I have read and understand the rules that apply to completing this form. This form has been examined by me and, to the best of my knowledge and belief is true, correct, and complete. I furthermore agree to the terms and conditions that bind this scholarship program.

Also I, _____ consent / do not consent to having my name, photograph, image, and or quotes used for publication in newsletters, annual reports, videos, Internet web page, and presentation displays by Sacramento County's Department of Human Assistance. I understand that members of the general public may see my picture/image.

Student's Signature: _____

Date: _____

Parent/Guardian Signature: _____
(if under age 18 on May 1, 2020)

Date: _____

CHECK LIST

Please Check Each Box to Validate the Accurate Completion of Your Application:

- Read the Coversheet for Scholarship Program Rules
- Transcripts must be received before check issuance
- Two Letters of Recommendation if available
(Letters from any non-relative stating your positive aspects, such as, leadership, community involvement, school activities/achievements).
- Acceptance Letter or Proof of Enrollment or Proof of Application from the College you are Scheduled to Attend
(If chosen for a scholarship, a check will not be issued until proof of acceptance is provided).
- Completed and Attached Typed 1,500-Word Essay
- Signed Application
- Parent/Guardian(s) Signed Application if Applicant is Under 18 on May 1, 2020
- All Questions on the Form were Answered (no answers were left blank)
- Application emailed by 5:00 PM **April 3, 2020**

GOOD LUCK!