



Out for Education

2018 Scholarship Instructions

Objective:

Out for Education (OFE) recognizes outstanding lesbian, gay, bisexual, and transgender (LGBT) students and contributes toward their college education. This scholarship program celebrates the achievements of the individuals who are worthy of our support.

Scholarship Description:

Scholarship awards will be determined by funds available at the time they are granted. During the last several years, **OFE** has recognized and granted outstanding LGBT students multiple scholarships ranging from \$1,000 over one year to \$10,000 over four years. To assure continuing scholarship eligibility, students must maintain a minimum 2.75 out of 4.0 GPA and a full-time student workload (24 hours over an academic year). Also, the scholarship recipient **must provide an official transcript at the end of each academic year (postmarked no later than February 28, 2018) to be eligible for continued disbursement of funds for the following academic year.**

Qualifications for Scholarship Award:

The award of this scholarship will be based on a combination of achievement in the areas of academic excellence, leadership, extra- and co-curricular activities, and financial need. Eligible applicants must be attending or have attended a Houston-area (which includes Harris or a contiguous county) high school or college at the time of application and must be between the ages of 17 and 25 (as of February 28, 2018). Applicants will be required to complete the attached application and submit an essay. The essay should include a biographical narrative discussing your self-identification as a member of the LGBT community. It needs to include your role in relation to your family, your school, your friends and community, and your personal and professional goals. This essay may differ from the traditional essays required by scholarship organizations, as we want to know about you as an individual.

Selection Process:

To qualify for the selection process the student must submit:

- A completed application;
- A current *official transcript* in a sealed envelope;¹
- An essay;
- A resume; and
- Two letters of reference (emailed as scanned copies directly to us by each reference)

OFE will judge each applicant's completed application, overall achievements, and financial need. The selection committee will then make preliminary selections for finalists who will be invited to an interview. These finalists will be interviewed individually by a panel of community members on April 14 & 15, 2017.

Schedule for Scholarship Application:

Applications, except for the transcript (see footnote 1, below), must be **emailed to ofeapp@gmail.com** no later than **February 28, 2018**, and must include a completed application, essay, and the resume. References should be emailed separately by each reference, and each reference letter must also be **emailed** no later than **February 28, 2018**. **All completed forms must be emailed to ofeapp@gmail.com by the due date.** **Incomplete applications will not be considered.**

Remember to mail ONLY your official transcript, to be **postmarked by February 28, 2018**, to the following address:

Out For Education
PO Box 667010
Houston, TX 77266-7010

Awards Ceremony:

The awards ceremony will be held (tentatively) on May 19, 2018 at Alley Theatre. All scholarship recipients are expected to attend. Students will be notified if they are receiving an award on May 11, 2018.

¹ Please note that you must send your official transcript, in a sealed envelope, to be **postmarked no later than February 28, 2017**, to the following address: **Out for Education, P.O. Box 667010, Houston, TX 77266-7010**. The rest of your application materials should be emailed, no later than February 28, 2017, to ofeapp@gmail.com.

OUT FOR EDUCATION 2017 SCHOLARSHIP APPLICATION

Please type or print legibly:

Name _____ Street Address _____

City/State/Zip _____ County _____

E-mail Address _____

Home Phone _____ Cell Phone _____ (check preferred #)

Are you a Current High School Student? YES NO (Please check one) Age as of 02/28/2018: _____

Birthdate _____ Gender _____

High School Attending or Attended _____ Expected/Actual Graduation Date _____

Approximate Class Ranking, if known (For example: 23 of 42) _____ GPA _____

College Currently Attending or Attended _____

Degree (BA, BS, etc) & Major _____ Expected/Actual Graduation Date _____

Approximate Class Academic Ranking, if known (For example: 23 of 42): _____ GPA _____

You must send a current *official* transcript

Submit a resume that lists the following: extra- and co-curricular activities, hobbies, achievements in and out of school, academic honors, and other experience pertinent to the receipt of this scholarship.

Do you participate in any LGBT-based youth groups? ____ Yes ____ No

If you checked "Yes" for the question above, please list the youth group(s):

How do you self-identify?: Gay ____ Lesbian ____ Bisexual ____ Transgender ____

Are you "out" to anyone? Describe: _____

What is/will be your major field(s) of study in college? _____

Which educational institution(s) have you applied to or are you currently enrolled in?

Which educational institution(s) have you been accepted to?

Student Name _____

OUT FOR EDUCATION Scholarship Application – Page 2 of 5

Please attach a typed essay. This is an essential part of the application that allows us to better understand your motivations for seeking higher education. This essay should be 500 words and should be a biographical narrative about your life: how do you interact with your family; what are your two proudest accomplishments; what impact do you have in your community or at school; what are your personal and professional goals; and how you expect to make future contribution to a better LGBT society? What **distinguishes** you from other applicants? Is there anything vital you want to share that we have failed to ask?

Please limit your essay to approximately 500 words, equivalent to two typed, double-spaced pages. **Please put your name in the upper right hand corner of each sheet.**

Financial Information

What are your anticipated total costs of college **per academic year**, including tuition, fees, room & board, and books?

Please circle the option below that you think is the most accurate:

Unknown <\$10,000 \$10,001 - \$20,000 >\$20,000

What sources of income do you anticipate using to pay your college costs? Indicate below each applicable source which has been granted and which is still in process.

Please circle each applicable source below:

Scholarships Income from Work Savings Grants Student Loans

What is your parents/guardian total yearly income?

Please circle the option below that you think is the most accurate:

<\$25,000 \$25,001 - \$50,000 \$50,001 - \$75,000 >\$75,000

Are your parents/guardian **willing** to help you with the cost of your education/ If yes, how much can they contribute annually?

Do your parents/guardian presently provide college financial support for other siblings in your family? If so, how many?

If you do not receive this scholarship, what steps will you take to pursue your education? Please briefly list other scholarships/grants for which you have already applied. Note in parenthesis whether you have been awarded this scholarship already.

Student Name _____

OUT FOR EDUCATION Scholarship Application – Page 3 of 5

College Information

In order to distribute scholarship funds to your educational institution, you must provide the following. If you have not been accepted to your institution yet, this information must be provided to us when known. If you are unsure of the correct contact information to include, please call your school's financial aid/scholarships office and ask them to what address scholarship checks from outside organizations should be mailed (and to whose attention, if necessary).

Note that if you fail to provide the correct information, such failure may delay receipt of OFE scholarship funds at your school's financial aid office and delay the crediting of such funds to your account.

Educational Institution Name: _____

Recipient Name on Check (school name, registrar, etc.): _____

Financial Aid/Scholarship Office Name: _____

University Street/Box Address: _____

University City/State/Zip _____

You must provide a current *official* transcript at the end of each academic year (postmarked no later than February 28, 2018) in order to keep an ongoing scholarship. NO TRANSCRIPT = NO MONEY

Scholarship Recipient Agreement

A. Providing Records -- If I am granted an OFE Scholarship, I agree to provide the following information to OFE while I am enrolled in a university/institution of higher learning and receiving said scholarship funding:

1. I will supply OFE with a copy of my *current, official transcript* at the completion of each academic year (postmarked no later than February 28, 2018). Official transcripts must come in a sealed envelope from the school. **Remember, NO TRANSCRIPT = NO MONEY.**
2. Should I withdraw from the university after registration, I will promptly inform OFE so an application for a refund of scholarship funds can be submitted.
3. I will keep OFE current on all my addresses, telephone numbers, and e-mail changes throughout the academic year.

I understand that failure to provide the requested information may lead to withdrawal of ongoing scholarship funds.

Printed Name	Signature	Date
--------------	-----------	------

B. Publicity -- If I am granted an OFE scholarship, I understand that from time to time OFE may wish to use my name and/or photograph in an OFE publication or in a publicity item submitted elsewhere by OFE for publication. By signing “yes” below, I give OFE a release to use my name and/or photo. **Alternatively, I also understand that I may deny such permission without in any way jeopardizing my scholarship funding.**

Yes, you may use my name and/or photo for publicity _____

Signature	Date
-----------	------

No, you may **not** use my name and/or photo for publicity _____

Signature	Date
-----------	------

C. Volunteer Assistance -- If I am granted an OFE scholarship, I understand that I *will* be asked to volunteer from time to time **AT LEAST** one event related to Out for Education and/or a fundraising event for an organization that donates to OFE. I understand that an unexcused failure to volunteer may disqualify me from continued scholarship support.

Signature	Date
-----------	------

OUT FOR EDUCATION Scholarship Application – Page 5 of 5

D. References -- Two personal reference forms are enclosed with this package. Please select people who are not close friends or relatives but who know you well and can tell us about your capabilities and achievements. They should send the completed forms directly to the email address on the form, to be **received no later than February 28, 2018**. Please enter the names, addresses, and telephone numbers of your references in the spaces below.

Reference 1:

Name _____

Address (Street/City/State/Zip) _____

Telephone Number _____

Relationship to Applicant (e.g. Teacher, Counselor, Supervisor) _____

Reference 2:

Name _____

Address (Street/City/State/Zip) _____

Telephone Number _____

Relationship to Applicant (e.g. Teacher, Counselor, Supervisor) _____

Your checklist for a completed application, to be emailed no later than February 28, 2018:

_____ This 5-page application

_____ Biographical Essay

_____ Current *official* school transcripts in a sealed envelope (to be mailed via U.S. mail to the address below)

_____ Resume

_____ Two letters of reference (emailed directly to us by each reference)

You should keep a copy of this entire application for your file. Again, remember that all application materials are to be emailed to ofeapp@gmail.com by the due date, except for your current, official transcript, which must be postmarked by the due date and mailed to:

**OUT FOR EDUCATION
PO Box 667010
Houston, TX 77266-7010**

Student Name: _____

OUT FOR EDUCATION Scholarship Reference Form

PFLAG (Parents, Families and Friends of Lesbians and Gays) is part of an international organization with more than 460 chapters. PFLAG and HATCH (Houston Area Teen Coalition of Homosexuals) jointly created the PFLAG/HATCH Youth Scholarship Foundation (PHYSF) in 1999, which offers a scholarship program to assist worthy LGBT youth in the Houston-area in pursuing a college education. The scholarship program is for Houston-area GLBT students who have demonstrated outstanding achievement while in high school or college. In October 2013, PHYSF changed its name to Out for Education to better reflect the scholarship organization's mission and core constituency.

Please complete the following to assist us in evaluating this student's application for this scholarship, which could be as high as \$2,500 per year, renewable for four years. The amount will depend on funding available when the scholarships are granted. We thank you in advance for your time and effort. Completion at your earliest convenience would be appreciated. Please email the completed form, to be **received** no later than **February 28, 2018**, to ofeapp@gmail.com.

Thank you for your support of this student. If you have any questions please feel free to email the following address: ofeapp@gmail.com.

Your Name _____

Please briefly describe your relationship to the Student: _____

Address (street/city/state/zip) _____

Telephone number _____

Email address _____

Please feel free to approach your answer to the questions on the following pages in a conversational way – as though you were visiting with us about him/her. This is your chance to help us know this student as you do.

5. What else do you consider important for us to know about this student regarding family, school, extracurricular activities, or any other aspect that you consider relevant to mention?

Please attach additional pages if you would like to include more information.

Student Name: _____

OUT FOR EDUCATION Scholarship Reference Form

PFLAG (Parents, Families and Friends of Lesbians and Gays) is part of an international organization with more than 460 chapters. PFLAG and HATCH (Houston Area Teen Coalition of Homosexuals) jointly created the PFLAG/HATCH Youth Scholarship Foundation (PHYSF) in 1999, which offers a scholarship program to assist worthy LGBT youth in the Houston-area in pursuing a college education. The scholarship program is for Houston-area GLBT students who have demonstrated outstanding achievement while in high school or college. In October 2013, PHYSF changed its name to Out for Education to better reflect the scholarship organization's mission and core constituency.

Please complete the following to assist us in evaluating this student's application for this scholarship, which could be as high as \$2,500 per year, renewable for four years. The amount will depend on funding available when the scholarships are granted. We thank you in advance for your time and effort. Completion at your earliest convenience would be appreciated. Please email the completed form, to be **received** no later than **February 28, 2018**, to ofeapp@gmail.com.

Thank you for your support of this student. If you have any questions please feel free to email the following address: ofeapp@gmail.com.

Your Name _____

Please briefly describe your relationship to the Student: _____

Address (street/city/state/zip) _____

Telephone number _____

Email address _____

Please feel free to approach your answer to the questions on the following pages in a conversational way – as though you were visiting with us about him/her. This is your chance to help us know this student as you do.

5. What else do you consider important for us to know about this student regarding family, school, extracurricular activities, or any other aspect that you consider relevant to mention?

Please attach additional pages if you would like to include more information.