

Cami Barnes Scholarship Foundation Application Form

Date of Application	Student	ID Nu	mber	Student Enroll	lment	Туре		
				Full-Time		Part-Time		
Personal Information								
Full Name					Gender			
Address								
Phone Email				Date of Birth				
Trauma Survivor Yes No Childho				ood Survivor?	Adult Survivor?			
Marital Status	Single	N	/larried, n	umber of depende	ent(s)			
Employed? Yes No Ethnicity:					Race	Race:		
Education								
Degree & Major University			У	Expected Graduation Year		G.P.A	City, State	
Career Plans Upon Gr	raduation							
By completing this application associated with bei include your willingrescholar on our webs	is true to ng selecte ness to att site and s	your ki ed to re end a ocial m	nowledg eceive th lunch me nedia pag	e, and you acce ne scholarship fu eeting with Cam	pt the inds. i Barn ccess	expectation The terms tes, being les to addition	ons and terms of acceptance highlighted as a	
Printed First & Last Name				Signature & Date				

Upload or email your completed application form along with your accompanying essay (3-5 pages long, in APA format) describing why you should be selected for the scholarship funds. If selected to move forward in the process for consideration, you will receive an email inviting you to schedule a Zoom interview with the selections committee.