

Mail with essay to:
PO Box 662
Alton, IL 62002



APPLICATION FOR 2025 SCHOLARSHIP AWARD

Personal Information:

Name		Phone Number	
Address		Email	

Education Information:

High School		GPA	
Expected Graduation Date			

Volunteer Time:

A qualification of this scholarship is to complete a minimum of 20 hours of volunteer time. Please list where you completed or will complete the volunteer time and the name and phone number of a person that can verify the time completed.

Organization	Activity	Contact Name	Contact Phone Number

Essay:

Please attach a 300-word essay describing how you have or how you plan to contribute to the enrichment and benefit of the LGBTQ+ community.

Please provide a brief description of your education plans and how you would utilize this scholarship.

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Alton Pride, Inc. may wish to utilize your name and/or picture in announcements of the award, if you are selected. Please sign below indicating your permission in using your name and/or picture. Please include a parent's signature if applicant is under the age of 18. **Application due by January 31, 2025.**

Applicant

Parent or Guardian (if required)