

Student Application Forms for Christine Daniels Scholarships 2024

<http://foundersmcc.org> 4607 Prospect Avenue, Los Angeles CA 90027 (323/669-3434)

Requirements:

1. Applicant should be enrolled in an accredited college or university and working towards Associate, Bachelor’s, Master’s or Doctoral degree, or completing transfer requirements towards a higher degree in a field that will be of benefit specifically to LGBTQ and Gender Non-conforming (GNC) communities. Please enclose transcripts from all schools attended.
2. Applicants may be enrolled in a vocational school if their field of study can be specifically related to preparation for work in the LGBTQ and GNC communities.
3. Applicants working towards their degree program must be completing more than half of their attempted units and show at least a **2.7 GPA**. Note priority ranking will be given to applications with the highest GPAs and completion rates.
4. Applicants will state their vision of the future for LGBT and GNC communities, and how they intend to facilitate that vision after graduation (write *Statement of Purpose*, about 500 words).
5. Verification of enrollment, employment, or volunteer experience may be provided by a resume accompanied by letters of recommendation, college transcripts, university or trade school acceptance letters, employment history, and volunteer work-hour statements from agencies/ nonprofits.
6. Please email application to FoundersMCC (Ina at inamcc100@yahoo.com). You may also mail to Founders MCC office (address in header above), addressing envelope to ‘Students Scholarship Awards Committee’.
7. Completed applications must be received by **5pm (PST) Friday 2nd August 2024** to be eligible for review by Scholarship committee. Send an email to Ina at inamcc100@yahoo.com to get confirmation your application has been received.

Name _____ Date _____ /2024/

Address: _____

Phone (cell) _____ Phone (other) _____ Email _____

Education Summary:

Enrolled: Undergraduate Program _____, Graduate Program _____

Degrees: (BA, BS) _____ Post-Grad (MA, MS, PhD, MD) _____

Colleges/Universities: _____
(Reminder: enclose copies of all school transcripts with application)

Employment or Volunteer Experience

Employer _____

Address _____
Street City State Zip code

Dates of Employment: From _____ To _____

Phone Number _____

Job Description _____

Employer _____

Address _____ CA
Street City State Zip code

Dates of Employment: From _____ To _____

Phone Number _____

Job Description _____

Employer _____

Address _____
Street City State Zip code

Dates of Employment: From _____ To _____

Phone Number _____

Job Description _____

Personal References:

Name _____ Phone Number _____

Address _____

Position Title _____

Name _____ Phone Number _____

Address _____

Position Title _____

Name _____ Phone Number _____

Address _____

Position Title _____

Details of Undergraduate/Graduate Education:

College/University Name: _____

Major _____ Minor _____

Degree to be Conferred: _____

Title of Academic Project (if any): _____

Anticipated Date of Entry: _____ Date to be completed: _____