

Description

Scholarships in the amount of \$2,500 will be offered by the Jean Paul Ohadi Foundation through the Deerfield Chapter of PFLAG.

Purpose of Award

To recognize outstanding LGBTQ youth from the community. To encourage continuing education for self-identified LGBTQ youth. To foster a positive image of LGBTQ young people in society.

Eligibility

LGBTQ youth 17 years or older (not to exceed 22 years of age).

Applying to attend (or currently attending) a post-secondary educational institution. Cannot be a prior winner of this award.

Must be a resident of the state of Illinois at the time of application.

Must submit an application with required supporting materials.

Recipients must be present at awards event to accept scholarship in person May 20, 2025.

Terms

Cash awards will be paid jointly to the student and the institution. Valid only for one academic year (Fall 2025 through Summer 2026). The student will be required to carry a minimum of 3/4 of the school's "full" schedule of courses.

Application Deadline

Application and all supporting material must be received or post marked by April 1, 2025. All applicants will be notified of results by May 1, 2025

Obtain applications from your school counselor or online at <u>https://deerfield.pflag.org/jean-paul-ohadi-scholarship/</u>

All materials should be directed to:

email: Texnbell@mac.com

Cynthia Drey 730 Scenic Ranch Circle Fairview, Texas 75069

Criteria for Judging Applications

Openly gay, lesbian, bisexual or transgender. Demonstration of integrity and honesty. Participation and leadership in community activities. Active participant in gay, lesbian, bisexual or transgender organization. Demonstration of financial need.

APPLICATION

(All information kept strictly confidential)

Applicant Information

Name				
Address				
City/State/Zip				
Phone	Birthdate			
Social Security Number		— Email _–		
Permanent address	Street		City/State/Zip	
Permanent phone number				

References

Have two adults write letters of recommendation and mail them to us. Include one family member, if possible. List names, addresses and phone numbers.

Name	Name
Address	Address
City/State/Zip	City/State/Zip
Phone	Phone

Requirements

Applications will be considered only if received by April 1, 2025

Include the following:

- Completed application form
- Completed questionnaire
- Your high school or GED transcript (sent by your school) or
- Your most recent post-secondary transcripts (if applicable)
- Two letters of recommendation (sent by your references)

Application and supporting material must be received via email or post marked by April 1, 2025.

Send all materials to: Cynthia Drey, PFLAG Board Member

email: Texnbell@mac.com

Cynthia Drey 730 Scenic Ranch Circle Fairview, Texas 75069

If you have questions, or if your phone number changes, email or call Cynthia at 847-571-5387.





APPLICATION (All information kept strictly confidential)

Scholarship Questionnaire Form

(Please note that all responses will be kept confidential)

Please type or print your responses.

Applicant

Applicant's Name_____

Intended Major _____

1.

- A. Name of school(s) you plan to attend and addresses.
- **B.** What is your admission status?

2.

How will you finance your post-secondary education? (Student loans, grants, scholarships, parents, part/full-time employment, etc.)

EXCLUSIONS: If your full tuition and fees are being paid by grant or other funding (Vo-Tech, for example), you are not eligible for the scholarship.

3.

What jobs have you held (including volunteer work)? What have you gained from these experiences?

What are your interests, hobbies or extracurricular activities? Choose one and tell how it has affected your life.

5.

What would you like to be doing ten years from now? How do you plan to achieve this?

6.

What achievement or accomplishment has made you especially proud?

7.

How has the fact that you are gay, lesbian, bisexual or transgender affected your life?

8.

Is there anything else you want to tell us?

9.

How did you find out about the PFLAG scholarship program?

- School counselor: What School? ______
- □ Meeting: What meeting? _____
- Radio/TV: What station? ______
- \square Internet
- \Box Friend
- \Box Other: ____

Transcripts



Please type or print your responses.

Applicant

Please fill out form, print, sign and give this page to high school or post-secondary institution registrar, so that transcripts will be received by the April 1, 2025 deadline.

Applicant's Name_____

Date of Birth_____ Social Security Number_____

Registrar

Dear Sir or Madam:

The above individual has applied for a PFLAG Scholarship.

Please send a copy of their transcript to Cynthia Drey, head of the Scholarship Selection Committee: email: Texnbell@mac.com

Transcript can also be mailed to: Cynthia Drey 730 Scenic Ranch Circle Fairview, Texas 75069

A release of information is provided below.

Release of Information

Ι

authorize the release of transcripts to the Deerfield Chapter of PFLAG, c/o Cynthia Drey, Board Member and Vice President of the Jean Paul Ohadi Foundation.

Signed _____ Date _____