



TOM AFFHOLDER LGBT LEADERSHIP AWARD

Application

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ ID #: \_\_\_\_\_

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List honors and awards received.

List chronologically (earliest to current) employment held while enrolled as a university student. Please include summer employment.

Employer	Type of Work	Dates of Employment

On the next page, provide a typed personal statement which addresses:

- a. Involvement, participation, and leadership in the LGBT community on campus;
- b. Citizenship and character;
- c. Ambition to do your best and to make the best of your opportunities;
- d. Potential for success in a profession; and
- e. Financial need.

*Note: You may attach additional pages if needed.*

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*By signing this application form the applicant confirms that s/he is a UWW student holding sophomore, junior or senior status. The applicant's signature also indicates that s/he is aware that in the event that the scholarship recipient voluntarily discontinues his or her UWW education or fails to remain in good academic standing, s/he shall forfeit his or her right to the scholarship and monies shall revert back to the scholarship fund.*

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_