
ATHLETIC INFORMATION

Your Sport(s): _____

Athletic Achievement(s): _____

Coach's Name (if applicable): _____

Coach's Phone Number: _____

Coach's Email Address: _____

Are you a member of an athletic club or organization? Yes No

If yes, describe your participation: _____

Are you an active participant in a LGBT organization? Yes No

If yes, describe your participation and commitment to this organization.: _____

What, specifically, will the scholarship funds be used to pay for?

Do you have a sponsor helping you financially? Yes No

If yes, who?: _____

If yes, how much financial support do you receive?: _____

Please provide two references (other than family):

Reference #1 (Name): _____

Phone Number: _____ Email Address: _____

Reference #2 (Name): _____

Phone Number: _____ Email Address: _____

ESSAY QUESTIONS

Please answer the following questions on another sheet(s) of paper.

1. Who is the most influential person in your athletic life? Tell us why, in 50 words or less.

2. In 300 words or less, tell us what this financial support would mean to you. Describe your educational and athletic goals as well as how you would use this grant.

I acknowledge that all of the information that I have provided to the Gene and John Athletic Fund of Stonewall Community Foundation is accurate and true to the best of my knowledge:

Name: _____

Signature: _____ Date: _____

(If applicant is under 18 years of age, please provide a parent or guardian's contact information.)
Parent/Guardian Name: _____

Address: _____

Phone Number: _____

Application Deadline: July 31st

Submit the completed form by mail or e-mail to:

Gene and John Athletic Fund of Stonewall Community Foundation
119 West 24th Street, New York, NY 10011

Email address: stonewall@stonewallfoundation.org

Scholarship recipients will be notified in August.

For more information on the Gene and John Athletic Fund of Stonewall Community Foundation, please visit: www.geneandjohnfoundation.org.