



CULTURAL DIVERSITY FOUNDATION SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

Name:		
Date of birth:	SSN:	Sex: Male _____ Female _____
Address:		
City:	State:	ZIP Code:
Home Phone:	Work Phone:	Email:

Are you a Nevada, Clark County Resident? Yes _____ No _____ How long?

Name of the scholarship that you are applying for?

COLLEGE/SCHOOL INFORMATION

Please provide the name of the college/professional school in which you plan to enroll or are currently enrolled

College/School:	Dates Attended:
City/State:	Have you been accepted? _____
GPA: _____	

What is your intended field of study?

List your community service activities:

Please attach the following:

Official copy of school transcript

Two- page essay, double spaced

Two letters of recommendation written on professional letterhead and signed

Applicants must have filed Free Application for Student Aid (FAFSA) and must attach a copy of Student Aid Report (SAR) to this application, which shows parent's income and parents contribution (EFC). Tax return may be requested.

Application must be submitted to the scholarship committee by Friday, May 4, 2012

Mail to:

Cultural Diversity Foundation
Scholarship Committee
500 N. Rainbow, Suite 300
Las Vegas, NV 89107
Telephone: (702) 646-2615
Fax: (702) 221-2086
Email: info@cdfnv.org

PLEASE DO NOT FAX OR EMAIL APPLICATION MATERIALS