The David Womack Memorial West Virginia LGBT Scholarship Application – 2016 Year (due June 30, 2016)

Full Name: _____ Date of Birth: _____
(Must be between 18 and 25 years old)

Address: _____ Phone: _____

_____ Email: _____

School and Program Attended/Accepted: _____
(Please provide evidence)

Proof of WV Residence: _____ (please attach)

Please either write below or on additional sheets a one or two page essay describing your background and life, educational history, goals for the future, charitable and/or political involvement and why you feel that you should receive the scholarship.

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Mail to: The IanThom Foundation, 44 Blossom View Court, Shepherdstown, WV 25443