



CONNECTICUT GI CHARITABLE FOUNDATION GRANT APPLICATION

Date of Application:

Please type or print your answers. If application is illegible it will be returned to you.					
1.	Last Name:	First Name:			
2.	Mailing Address:: Street: _____ City: _____ State: _____ ZIP: _____				
3.	Daytime Telephone Number:	Cell Number:	Email:		
4.	Date of Birth: Month	Day	Year		
5.	Are you related to any Connecticut GI staff? (Please circle)		Yes	No	
6.	Current High School/University:				Number of years attended:
7.	Level of study in next academic year: Freshman Sophomore Junior Senior Grad Student				
8.	Name & address of parent(s) or legal guardian(s): Use reverse side of application if you need more space. Name (s) _____ Street: _____ City: _____ State: _____ ZIP: _____ Home phone of parents or legal guardians: _____				
9.	List the name of any college you have attended.	Year Began	Year Ended	Year Graduated (If applicable)	Type of Degree Received (If applicable)
10.	A.				
	B.				
	C.				
11.	What specialty/major do you plan to major in as you continue your education?				

12.	List your academic honors, awards and membership activities while in high school:
-----	---

13.	List your community service activities, hobbies, outside interests, and extracurricular activities:
-----	---

14.	<p>Personal Essay Please answer the following question: Based on your own experience, what advice would you give others living with GI or liver conditions? This question must be at least 1-2 pages, typed, double-spaced, and 12 pt / Time New Roman font. Please ensure your essay contains no grammatical errors.</p>
-----	---

15.	<p>A. The following Yes/No items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee. B. Your application will not be considered if the Yes/No items are not attached to this application. (No exceptions.) C. Circle “YES” or “NO” to be sure you have attached each item as required. D. The picture request is optional and your application will be reviewed if submitted without a picture.</p>		
	YES	NO	Completed application. All questions are answered completely.
	YES	NO	Most recent <u>official</u> high school/college transcripts. Photocopies of your transcript are <u>acceptable</u> , if transcript is signed by a guidance counselor or principal.
	YES	NO	Personal Essay. Must be at least 1-2 pages, typed, double-spaced, and 12 pt / Time New Roman font. Please ensure your essay contains no grammatical errors.
	Yes	No	Proof of diagnosis form
	Yes	No	Two letters of recommendation
	Optional		Picture of Applicant

I hereby affirm that all the stated information provided by me is true and correct to the best of my knowledge. I understand that if chosen as a scholarship recipient, according to the Connecticut GI Foundation Grant policy, I must provide evidence of enrollment/registration at the post-secondary institution of my choice before grant funds can be awarded. In addition, I understand that if I am awarded a grant, Connecticut GI may use my first name and first initial of my last name for publication.

Required Signature of grant applicant: _____ Date: _____

Required Signature of applicant's guardian/ parent: _____ Date: _____

The below consent is optional and will not in any way preclude your application from being reviewed or you being awarded a grant.

Your story is unique and compelling and, we feel, can help others in a similar situation. We would like to ask your permission to use the personal statement you provided, along with the picture you submitted (if you indeed submitted one). Please check the box next to yes, if you give Connecticut GI permission to use your personal statement and picture for publication. Check the box next to no if you would prefer that Connecticut GI not use your personal statement and picture. Please be sure to re-sign again if you give permission.

Yes, I give Connecticut GI permission to use my personal statement and picture for publication.

No, I do not give Connecticut GI permission to use my personal statement and picture for

publication. Signature of grant applicant: _____ Date: _____

Signature of applicant's guardian/ parent: _____ Date: _____