



2026 Bob Wiseman Memorial Scholarship Application

Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Telephone(s) _____ Email _____

Self-identify as: ☐ Lesbian ☐ Gay ☐ Bi-sexual ☐ Transgender
☐ Straight Ally ☐ Non-binary ☐ Other (specify) _____

Gender Pronoun(s) you use: _____

High School _____ GPA _____ Graduation Date _____

College, University, or Technical/Trade School(s) where you have applied:

<u>Name</u>	<u>Applied</u>	<u>Accepted</u>	<u>Enrolled</u>

Application Checklist:

Please read carefully the *Scholarship Information and Guidelines* regarding details for the required essay and letters of recommendation. Missing items may result in being removed from consideration for a Scholarship.

- Application (completed and signed)
- Essay
- Two letters of recommendation (one from high school teacher/staff; one from unrelated adult friend or member of community)
- Copy of most current complete high school transcript or equivalent document
- Copy of college/university/trade school admission notification (if received)

**All of the preceding items must be scanned and submitted via an email,
OR by mail in an envelope postmarked no later than Monday, March 2, 2026:**

**Bob Wiseman Memorial Scholarship
PFLAG Greater Placer County
2280 Grass Valley Hwy, # 293
Auburn, CA 95603**

- _____ *Please check here if we may let your school know that you are a recipient.*

Signature _____ Date _____