COMMUNITY EDUCATION FOUNDATION SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

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

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

Proof: Provide a copy of your Nevada high school diploma or final transcript indicating date of graduation

Or Provide Official document from NSHE institution indicating your residency status

Or, you, the applicant, filed taxes in the State of Nevada in the most recent tax year, earned wages or received nontaxable income (i.e., social security, welfare, disability or veteran's benefits) linked to a Nevada address and was not claimed as a dependent for Internal Revenue federal income tax purposes by another person

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, July 17, 2026

Mail to:

Community Education Foundation
Scholarship Committee
Po Box 370993
Las Vegas, NV 89137
Telephone: (702) 646-2615
Email: info@cef360.org