



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, May 1, 2026		
Mail to:		
Community Education Foundation Scholarship Committee PO Box 370993 Las Vegas, NV 89137 Telephone: (702) 646-2615 Email: info@cef360.org		