

Application Form

**The Luellen Laurenti Scholarship
In Women's, Gender, and Sexuality Studies
2024**

Name of Applicant: _____ Pronouns: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Local Address: _____

City: _____ State: _____ Zip: _____

Local Phone Number: _____ E-Mail: _____

University ID Number: _____ Current GPA: _____

Major: _____ Year: _____

Minor: _____

Women's, Gender, and Sexuality Studies Courses Taken (Names, Dates, and Grades): _____

Finalists will be required to submit a letter of recommendation. Name of faculty letter writer: _____

On a separate page, please provide a statement addressing your interest in women's, gender, and sexuality studies, your career goals, and the volunteer activities or community service in which you have been involved.

To be considered, please ensure that we receive your application by **4:00 pm on Friday, February 9, 2024**. The Women's, Gender, and Sexuality Studies Scholarship Committee will review the proposals and recognize the recipient at the Women's, Gender, and Sexuality Studies Symposium. Please mail or email applications directly to:

Women's, Gender, and Sexuality Studies Program

Campus Box 4260

Illinois State University

Normal, IL 61790-4260

Telephone: (309) 438-2947

Email: wgstudies@IllinoisState.edu

Website: <http://www.wgs.ilstu.edu>