



BFF Life Skills Program Scholarship Application

Thank you for your interest in the Brightside Forever Foundation Life Skills Program Scholarship. This scholarship is intended to support individuals committed to personal development and community impact. Please complete all sections of this application. All information will be kept confidential.

Section 1: Personal Information

Full Name:

Date of Birth: _____

Gender: _____

Phone Number:

Email Address:

Mailing Address:

Preferred Method of Contact:

Phone Email Text

Do you have a disability? Yes No Prefer not to say

Tell us a little about yourself. What are your hobbies? What do you do for fun? Anything else you want us to know about yourself?

Section 3: Short Answer Questions

Please answer the following questions thoughtfully. Each answer should be 3–5 sentences.

Why are you interested in the Life Skills Program?

What challenges have you faced that you believe this program can help you overcome?

How do you plan to use the skills learned in this program to improve your life or community?

Section 4: Financial Information

What is your current yearly family income (if any)?

\$ _____

Please describe any financial hardships or reasons you are seeking a scholarship:

Section 5: References

Please list one or two people (non-relatives) who can speak to your character or commitment.

Reference 1:

Name: _____

Relationship: _____

Phone or Email: _____

Reference 2 (optional):

Name: _____

Relationship: _____

Phone or Email: _____

What is the name of the program you wish to attend?

When do you plan on starting in the Life Skill program?

Section 6: Agreement

By signing this form, I certify that the information provided is true and complete to the best of my knowledge. I understand that submitting this application does not guarantee a scholarship award.

Signature: _____

Date: _____

* Finalist will be interviewed before the scholarship(s) are awarded: