



Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Employer \_\_\_\_\_ Employer City \_\_\_\_\_

**Please indicate type of organization you represent:**

- Small Business
- Educational institution
- 501 (c) (3) organization; Type: (Arts, Human Services, Health Care, etc.) \_\_\_\_\_
- Other (please specify): \_\_\_\_\_
- Religious/ordained clergy
- Government agency

**Does your organization employ fewer than 100 people?**  Yes  No

**LEADERSHIP**

List your current and anticipated leadership positions within your organization and in any volunteer activities:

\_\_\_\_\_  
\_\_\_\_\_

**VOLUNTEERISM AND COMMUNITY SUSTAINABILITY**

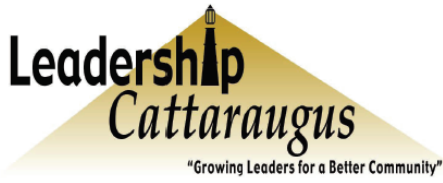
List any volunteer activities demonstrating your interest in building a better community:

\_\_\_\_\_  
\_\_\_\_\_

**AMOUNT REQUESTED**

Partial scholarships to Leadership Cattaraugus will be offered. Scholarships will cover the lesser of 25% of the cost of tuition or \$400. The number of scholarships and size offered each year will be contingent upon availability of funding.

**Amount of your request:** \$ \_\_\_\_\_



# Leadership Cattaraugus Scholarship Application

## **GOAL STATEMENT**

In 200 or fewer words, explains why you want to participate in Leadership Cattaraugus and what this financial assistance would mean for you.

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*Please submit your scholarship application to [foundation@cattfoundation.org](mailto:foundation@cattfoundation.org) by Sept. 30*