



Youth Scholarship Application

25th Annual Trail of Tears Association & Symposium
Cherokee, North Carolina | September 20-23, 2021

Submission Deadline: July 15, 2021

Name: _____

Email: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Gender: _____ Tribe: (if a tribal citizen) _____

High School Attended/Attending: _____ Graduation Year: _____

College Attended/Attending: _____ Expected Graduation Year: _____

Major Area of Study: _____ TOTA Member ☐ Yes ☐ No
(if in or graduated from college)

How did you learn about this scholarship? _____

Why is the Trail of Tears important to you? _____

Please describe below the Trail of Tears project or event in which you will be participating or have already participated. To whom and when will you be presenting on your participation in the project or event?

Minors must be accompanied at the conference by a parent or guardian. If you are under 18 years of age, please fill out the following about the guardian who would accompany you to the conference.

Name of Guardian at Conference: _____ Phone: _____

Relationship to Guardian at Conference: _____

Parent/Legal Guardian: _____ Parent Phone: _____
(if different than above)