**Pathways to Purpose Scholarship Application**

We are excited to offer the Pathways to Purpose Scholarship to support graduate students pursuing a counseling career with a passion for community service and dedication to helping underserved populations. This scholarship aims to empower the next generation of counselors to make a meaningful impact in areas such as mental health, school counseling, marriage and family therapy, and social work.

Thank you for your interest in the Fellow Traveler Counseling Pathways to Purpose Scholarship. Please complete all sections of the application. Incomplete applications may not be considered.

**I. Personal Information**

* **Full Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Email Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Phone Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Mailing Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. Academic Information**

* **Undergraduate** 
  + **University/Institution**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **Degree Earned (e.g., BA, BA)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Graduate** 
  + **Program Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **University/Institution**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **Degree Sought (e.g., MA, MS, MEd)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **Expected Graduation Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + **Are you currently accepted and enrolled?**☐ Yes  
    ☐ No

**VI. Personal Statement**Please provide a free response addressing the following prompts:

1. **What is your passion and purpose for pursuing a career in mental health counseling?**
2. **What populations do you feel most passionate about serving?**
3. **How do you envision using your degree to make an impact on the communities you serve?**
4. **What life experiences have influenced your decision to pursue this field?**
5. **Extracurricular Activities and Community Engagement**
   1. **Describe Your Community Service, Volunteer Work**, **Extracurricular Activities, Advocacy, or Leadership Roles**.
   2. **Explain how you spend your time outside of academics**
6. **How would receiving this scholarship help you achieve your goals?**

**VII. Certification**I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that any misrepresentation or omission may disqualify me from consideration for the scholarship.

* **Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submission Instructions

Please email your completed application, including any additional documents (e.g., financial statements, personal essays), to ftc\_info[@dglmft.com](mailto:info@dglmft.com) by **August 1, 2025.**

For any questions, contact us at **ftc\_info@dglmft.com.**