

2025 Scholarship Application

To be considered for the expense reimbursement, send a 250–500 word response to the questions below in an attached document to Jenny Root at JRoot@lacrossecounty.org. Priority may be given to survivors, families, or those planning to work in the field of mental health or suicide counseling.

Submit by: August 17, 2025

First name, last name:		
ompany: Title:		·
Address:		-
City:	State:Posta	code:
Phone:	Email:	
Quantity	<u>Description</u>	Cost \$105 (prior to Aug 17
	Attendee	
	Student	\$65
	Military (Active or retired)	\$65
	Seniors (age 62 and over)	\$65

Please address the following questions in your attachment:

- Describe your interest in the topics of mental health and suicide prevention. How have you been impacted personally or professionally?
- Describe your need for a scholarship. Do you have limited funding at your place of employment? Are you a community member or student who would like to participate but financially it would be difficult?
- What topics or specific sessions are of most interest to you? How will you apply the information gained?

Thank you!