



SCHOLARSHIP APPLICATION

- Fill out and return application
 - Scholarships are limited and are awarded on a “first come first serve” basis
 - Confirmation will be made within two weeks of receiving application
-

Name: _____

If the workshop is for families, will you be bringing other family members? List names: _____

Email: _____

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

Home Phone: _____ Work Phone: _____ Cell Phone: _____

What workshop/class would you like to receive a scholarship for?

Workshop/Class Title and Dates	Cost	Amount of Scholarship Requested
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

Why do you feel that you should receive a scholarship?

Why do you want to attend this workshop/class?