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| APPLICATION FOR CONSERVATION TEACHER’S SCHOLARSHIP | | | | | | | | | | | | | |
| *I would like to be considered for scholarship aid for a summer course in*  *Conservation, Outdoor or Environmental Education.* | | | | | | | | | | | | | |
| aName |  | | | | | | | Years Teaching Experience | | | | |  |
| Address |  | | | | | Where Teaching Now | | | |  | | | |
| City & Zip | |  | | | | Grade(s) |  | | | City |  | | |
| Home Phone | | |  | E-Mail |  | | | | School Phone | | |  | |

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| --- | --- |
| Subject(s) Taught |  |

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| Does your school and/or district have a program of conservation, outdoor or environmental education? | | | |  | |
| Briefly explain your role in this program | |  | | | |
|  | | | | | |
| Registered for Course |  | | \*Tuition & Fees | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructor’s Name |  | E-Mail |  | Phone |  |

|  |  |  |  |  |  |  |
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| College |  | | Address | |  | |
| Explain how this course will help you in your teaching role | | |  | | | |
|  | | | | | | |
| **Your contact at summer school:** Phone | |  | | E-Mail | |  |
| **If I am unable to attend the course listed above, any financial aid will be returned to the  Washington State Federation of Garden Clubs.** | | | | | | |
| Signature Date | | | | | | |
| Submit application by **April 1, 2019** to:  Bobbie Schoss  P.O. Box 522  East Olympia WA 98540-0522  bobbiescoverner@yahoo.com | | | | | | |
| **It is agreed that recipients of scholarships will make a written report to the Conservation Teacher’s Scholarship Chairman listed above upon completion of the course for which the scholarship was awarded.** | | | | | | |
| *\* Scholarship is for tuition and fees only. Transportation and other expenses are not to be included.* | | | | | | |