

AREA 11 Scholarship Request Form

Event: _____ Date of event: _____

Name _____

Address _____

Phone _____ E-mail _____

Membership# _____

This is my membership # This is the membership # of my organization

I am a: Director Ringer

I would like to attend this event for the following reasons:

Things I hope to learn or skills I hope to gain at this event are:

I plan to use my new knowledge and skills by:

AREA 11 Sub-Area Chair Comments/Recommendations –

AREA 11 Scholarship Chair Comments/Recommendations –

AREA 11 Executive Committee Consensus Yes No **Date** _____

Applicant Notification Date: _____

Date Final Report Received: _____ **Date Check Issued:** _____