

**CENTRE PIECES QUILT GUILD
WORKSHOP SCHOLARSHIP APPLICATION FORM**

Name: _____ Date: _____

Address: _____

Phone: _____ Workshop: _____

Short Description of Financial Need: _____

Recommended by (if other than applicant): _____

Criteria:

1. The award is based on financial need.
2. Awards can only be made up to the amount that is budgeted by the Board for the fiscal year.
3. The award covers workshop fees only, not patterns or supplies for the workshop.
4. Applicants must be members in good standing of the guild.
5. An applicant may receive only one scholarship award per guild year.
6. Applications should be submitted one month prior to the date of the workshop.
7. The Committee will discretely notify each applicant whether an award will be made or not.
8. All Scholarship Fund Committee business will be kept strictly confidential. The Committee will make every effort of confidentiality when notifying the Treasurer and head of workshop committee with sign up and payment.
9. Forms are to be destroyed at the end of each fiscal year.

Agreed and Approved by:

(All Scholarship Committee Members must sign and date.)

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____
