

Scholarship Application

Please submit this form at the time of registration to lisa.demeule@Illinois.gov
Successful applications will qualify for a portion of their application to be paid for.



Name –

Phone –

Email –

Address, City, State, Zip

Are you a first time BOW participant?

Yes

NO

I certify that the information on the application is true and accurate to the best of my knowledge and misrepresentation of any material may be grounds for ineligibility.

Initials

Explain how the Becoming an Outdoors-Woman® experience or the skills learned in the workshop will benefit you personally.

Clearly state your need for financial assistance to attend a BOW workshop. Indicate any special family situations, medical problems, employment status or any other factors that may affect your financial status.