Ridge & Hollow Seed Alliance Workshop Scholarship Form

This is a Need-Based Scholarship Application. It is the responsibility of the applicant to see that all items are complete and returned by the published deadline. Only complete applications will be considered. All information is strictly confidential. Scholarships are awarded based on money available, number of applicants, and applicant need. We endeavor to award as much as possible within these criteria. Scholarship awards are deducted from the total tuition charges.

**Part I: Applicant Information**

Name:

Address: Street/Apt # City State Zip

Home Phone: Work or Cell: E-mail address: Occupation: Employer:

What financial circumstances should be taken into consideration when reviewing your application?

How much assistance do you need in order to afford the class? $

DECLARATION: I declare that all information contained in this application is true, to the best of my knowledge.

I understand that deliberate false statements will result in the immediate rejection of this application and revocation of any scholarship funds.

SIGNED: DATE:

Submit completed applications to:

Jess Chadwell, Ridge & Hollow Seed Alliance Developer

94 Columbus Rd Athens OH 45701 [Jess@communityfoodinitiatives.org](mailto:Jess@communityfoodinitiatives.org)

Call 740-593-5971 with any questions

**For Office Use Only:**

Date Received: Award: Y/N Amount Awarded: $ Amount Owed By Participant: $