



GREEN MOUNTAIN **Audubon**  
CENTER

**Audubon Vermont Education Programs Scholarship Application**

*Please return this application by mail, fax, or in person as soon as possible. Please note that completing this form does not register you for a program. You must call the Center to register.*

**Address:** Audubon Vermont, 255 Sherman Hollow Rd. Huntington, Vermont 05462

**Questions?** Phone: (802) 434-3068 **Fax:** (802) 434-4686 **e-mail:** Vermont@audubon.org

Names of Program Participants \_\_\_\_\_ Adult \_\_\_\_\_ Child \_\_\_\_\_  
 \_\_\_\_\_ Adult \_\_\_\_\_ Child \_\_\_\_\_  
 \_\_\_\_\_ Adult \_\_\_\_\_ Child \_\_\_\_\_  
 \_\_\_\_\_ Adult \_\_\_\_\_ Child \_\_\_\_\_

Parents/Guardian(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

E-mail \_\_\_\_\_

Occupations \_\_\_\_\_

Are you (parent/guardian) an Audubon member? \_\_\_\_\_ Yes \_\_\_\_\_ No

Program you would like to apply for: \_\_\_\_\_

Amount of program scholarship you are requesting: \_\_\_\_\_

Additional amount you can afford to pay: \_\_\_\_\_

Have you previously received financial aid to attend a program at Audubon? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, in what year(s) did you receive financial aid? \_\_\_\_\_

***Please use the backside of this form or a separate sheet of paper to comment briefly on any expenses or circumstances you feel might signify your need for financial aid.***



**For Office Use Only:**

Date Received \_\_\_\_\_ Date Notified of Award: \_\_\_\_\_ Amount Awarded: \_\_\_\_\_