



School Program 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 your group for a school program; you must call and speak with the School Programs Coordinator to register for a program.

Address: Audubon Vermont, 255 Sherman Hollow Rd. Huntington, Vermont 05462
Attention: School Programs Coordinator

Group Information

School or group attending _____

Town _____

Grade/Ages of participants _____

Name of teacher or contact person _____

Phone number _____ Email _____

Name of Program _____

Date of Program _____

of students _____

Scholarship Information

Amount you can afford to pay (% or \$): _____

Amount of scholarship you are requesting (% or \$): _____

Have you previously received financial aid to attend a program at Audubon Vermont? ___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 explain briefly any expenses or circumstances you feel justify your group's need for financial aid.

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

For Office Use Only:

Date Request rec'd _____ Amount Awarded: _____ Date Notified of award _____