

**Wooden Horse Arts Guild, Inc.**  
**Camilla Mead Arts Education Scholarship Fund**  
**Application Form**

The purpose of the Camilla Mead Arts Education Scholarship Fund is to provide funding to enable youth and adults to enhance their personal growth and education in the areas of music, arts and crafts. (see pp3, Page 1) Applications are accepted from Vermont residents to participate in formal education in the arts, workshops, lessons, equipment, supplies (rental or purchase).

Applicant Name: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City and Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

How did you hear about the Scholarship Fund?

What is your area of interest/medium? \_\_\_\_\_

Please list your experiences in this area:

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**(THE BACK OF THIS FORM CAN BE USED IF MORE SPACE IS NEEDED. ONE APPLICATION PER FINANCIAL REQUEST, PLEASE.)**

**PLEASE DESCRIBE HOW YOUR AWARD WILL BE USED:**

What is the activity/study/event? \_\_\_\_\_ When/Duration? \_\_\_\_\_

Where? \_\_\_\_\_

How will this activity or study fit in with your future goals? Please be specific.

What do you hope to gain or learn by participating in this activity/class/study? Please be specific.

Who is sponsoring this program or school? \_\_\_\_\_

To ensure enrollment in your activity, or if funds are needed for instrument rental, supplies or private lessons, when is your response from the WHAG needed? \_\_\_\_\_

How is this activity consistent with the goals of the Wooden Horse Arts Guild, Inc. and the purpose of the Arts Education Scholarship Fund "to enhance personal growth and education in the areas of the Arts"?

What is the total cost of participating in this activity? Fees \_\_\_\_\_ Travel \_\_\_\_\_ Other \_\_\_\_\_

Amount you will contribute? \_\_\_\_\_ Amount requested from WHAG? \_\_\_\_\_

Reference letters from \_\_\_\_\_ and \_\_\_\_\_ are attached.

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Please mail completed application, along with the 2 letters of reference (not written by family members; letters by those familiar with the arts preferred, with one being from a party who would not benefit financially from this award.) Also, attach copies of brochures or registration forms showing the activity. Mail to: Scholarship Committee, Wooden Horse Arts Guild, Inc., P.O. Box 502, North Troy, Vt. 05859.

Signature of applicant \_\_\_\_\_

Print Name \_\_\_\_\_

Date of Application \_\_\_\_\_ Date received by office \_\_\_\_\_

Date decision required \_\_\_\_\_