

HANDWEAVERS' GUILD OF CONNECTICUT
APPLICATION FOR SCHOLARSHIP

Mail to:
Lisa Green
14 North Dr.
Simsbury, CT 06070
Or

Email to scholarship@handweaversguildofct.org

NAME: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

of Years In the Guild: _____ DATE: _____

1. What is the class or program to which you will apply the scholarship? Please give a brief summary of the material covered, the teachers, the cost of the class, and any related expenses for you.

2. Why do you want to take this class or program? How does it fit in with your goals as a weaver? Please give us the name of another Guild member who knows about your weaving experience.

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3. How would you be most comfortable sharing your new knowledge with other weavers? (ex. Giving a mini-workshop, displaying material at Show and Tell at a State meeting, visiting several area meetings, etc.)

We are interested in what Guild members do. The following is not required for us to decide awarding a scholarship, but we would appreciate your sharing the information:

I consider myself a: Beginner Intermediate Advanced Weaver

I weave for: Fun Sell Both

On average, I attend: ____ State meetings a year.

On average, I attend: ____ Area meetings a year.

I hold the following Guild Ratings: _____

I have earned the following non-Guild degrees: _____

Recent shows, exhibits, fairs, etc. in which I have placed my work:

Anything else you would like to tell us?

Signature: