



## 2017 Professional Development Summer Sessions

Intro to Aquaponics: June 27<sup>th</sup> - 29<sup>th</sup>  
Intro to Aquaponics: July 11<sup>th</sup> - 13<sup>th</sup>

Port Clyde, Maine

### SCHOLARSHIP FORM

Thanks to the generous support of the Borman Foundation, partial tuition scholarships from Herring Gut Learning Center provide modest financial support to participants who, without assistance, would be unable to attend one of our summer professional development sessions. We offer a few scholarships each summer, the quantity and amount determined in large part by funds available for disbursement. Not all who apply are guaranteed assistance.

#### SCHOLARSHIP ELIGIBILITY

Applicants who register on or before the May 31 application deadline are eligible to apply. Preference will be given to: educators teaching in Maine, who demonstrate a clear commitment to implementing what they learn in the course to their students, and who would be unable to participate in the course without tuition assistance.

Prior to submitting a scholarship request, we encourage you to seek funding from your school, organization or a grant-maker that supports educator training.

#### SCHOLARSHIP DECISIONS

Please submit your scholarship request with your application on or before May 31<sup>st</sup>, 2017. We will collectively review all applications received by this date, and will be in touch by email within 5 business days to notify you of the level of assistance we are able to provide. Upon notification, full payment (by check or credit card) is due within 3 weeks of invoice issue to retain your space in the workshop.

#### SCHOLARSHIP REQUEST

Name \_\_\_\_\_ School/org. \_\_\_\_\_  
School/org. mailing address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
School/org. phone \_\_\_\_\_ Email \_\_\_\_\_

Which session have you applied to attend?

- Aquaponics: June 27<sup>th</sup> – 29<sup>th</sup>
- Aquaponics: July 11<sup>th</sup> – 13<sup>th</sup>

**Questions**

1. What amount has your school budgeted for individual professional development? (If you are not affiliated with a school, what is your organization's current annual budget?)

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2. What amount will your school/organization contribute to the cost of this course?

\_\_\_\_\_

3. What course-related expenses, other than tuition, do you expect to incur (include amount)?

\_\_\_\_\_

4. Have you applied to other funders to cover the cost of your participation in this course?  Yes  No  
If yes, please list the name of the source(s), the amount(s) you requested, and when you expect to receive news of their decision. \_\_\_\_\_

\_\_\_\_\_

5. If you are not affiliated with a school or organization, please describe why you need financial support to attend this workshop. \_\_\_\_\_

\_\_\_\_\_

6. Please enter the total amount you are able to contribute toward the tuition as well as any other associated costs (e.g. travel, lodging, meals).

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7. Please provide any other information you think we need to know to review your request.

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Return this completed form along with your application by mail or email to:

- **Herring Gut Learning Center • P.O. Box 286 • 59 Factory Rd • Port Clyde, Maine 04855 •**
- Tel: (207) 372-8677 • [ebowe@herringgut.org](mailto:ebowe@herringgut.org)**