

APPLICATION FOR GOODSPRINGS HISTORICAL SOCIETY MINI-GRANTS and SCHOLARSHIPS

NAME

PARENT/GUARDIAN NAMES

ADDRESS

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Parent/Guardian Employer

PHONE H..... C..... E-MAIL.....

Date of Birth Place of Birth

Current SchoolPrevious Schools

GRADE..... Teacher/Teachers

HOBBIES SPECIAL INTERESTS

Please give a brief description of the purpose and scope of the proposed project.

What are your reasons for selecting this project?

What are the funding needs of the project? Include list of required supplies and cost estimate.

Please have a sponsoring adult (parent, teacher, mentor) compose a short supporting statement on your behalf and attach it to this application. Include their contact information.

If you are applying as a candidate for a scholarship please attach a statement to your application that explains how you plan to use your award. You can add any other information that you wish to share with the GHS Scholarship Committee or contact Goodsprings.org.

Signature

Parent/Guardian Signature