



NAME

NORTHWEST AQUATIC & MARINE EDUCATORS

Annual Conference Scholarship Program

“Confluence” • July 29 – August 2, 2018

Portland, Oregon

Applications for scholarships submitted through **April 30, 2018** will be notified of award status by May 15, 2018. Applications received after April 30 will be awarded as funds permit.

Name: _____

Institution: _____

Job Title or Student Status: _____

Address: _____

City: _____ State/Province: _____

Zip/Postal code: _____ Country: _____

Day phone _____ Evening/Cell phone: _____

E-mail address: _____

Fax: _____

Summer address and/or phone (if different): _____

Applying for: (there is no guarantee that all categories requested will be covered)

- Conference fee (full)
- Conference fee (half)
- Conference fee portion (denote amount) _____
- Travel stipend (effort will be made to set up carpools)

How many NAME Annual Conferences have you attended in the last three years?: _____

I am a: NAME member Student

Write a paragraph or two for each of the following questions. Please print or type responses separately and include with your application.

1. Briefly describe how you are involved in marine and/or aquatic education.
2. Briefly describe what specific information, skills or contacts you will be seeking at the NAME Annual Conference, and how they will be used.
3. What financial circumstances require you to seek a scholarship to attend the NAME Annual Conference?
4. Briefly describe any non-financial circumstances you would like the committee to consider in their decision.
5. NAME values relationships between educators and we feel that we have much to learn from one another. How has this principle affected you in your development as a student or educator?

I understand that:

- I must be an NAME member at the time of application to be eligible for a scholarship (waived for students);
- If I am awarded a full conference fee scholarship, I am expected to attend the full conference, taking maximum advantage of conference sessions and field experiences offered, and provide up to 6 hours of volunteer service to the conference
- I am expected to use information and skills gained at the conference to improve my education efforts;
- If awarded a scholarship, I will not be eligible for a scholarship for three subsequent NAME annual conferences; and
- If I decline to attend, the award is forfeited and cannot be applied to other conferences.
- Scholarships for lodging and/or transportation may or may not be available (depending on number of applicants and available funds).

I certify that all statements made above are true and correct.

Signature: _____

Date _____

Send completed form by email (preferred), mail or fax to:

Fawn Custer
PO Box 90
Seal Rock, OR 97376
envtgsldrfawn@aol.com