**Travel & Education Scholarship Application**

**MIDDLE SCHOOL APPLICANT INFORMATION**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade (current):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent(s) or Guardian(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACADEMICS AND ACTIVITIES

Please describe yourself. Include academic interests as well as hobbies, extra-curricular, community and/or work activities.

PROGRAM INFORMATION

Please describe the educational program or project that you seek funding for. Tell us why you chose the program or project and what you hope to get out of it. Please attach printed information about the program or give us an online link.

FINANCIAL INFORMATION

What is the total cost of your program or project?

What do you expect to receive from other funding sources? (ex. other scholarships, family contribution, fund-raising, etc.)

What do you personally plan to contribute?

OTHER INFORMATION

Please feel free to use the space below to share any additional information you would like to selection committee to know regarding your application.

Please give finished applications to: Wanda Davis-Oakes at School

mail to: Partners in Island Education, PO Box 664, Vinalhaven, ME 04863

or email: PartnersinIslandEducation@gmail.com