

NW ASSOCIATION
FOR
BLIND
ATHLETES

Scholarship Application

Please complete this application to apply for a scholarship from the Northwest Association for Blind Athletes (NWABA). Scholarships are for individuals, groups or teams wishing to participate in competitions or purchase training equipment. All applications must be received by the 1st of each month to be considered for a scholarship; the board will vote on applications at their next monthly meeting. Applicants may be asked to provide further information before a final decision is made.

Please send completed group scholarship application to:

Northwest Association for Blind Athletes
PO Box 65265
Vancouver, WA 98665-0009

Name of Individual/Group/Team _____

Name of Submitter _____

Address _____

Day Phone _____ Evening Phone _____

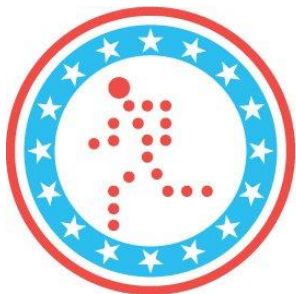
E-mail Address _____

What purpose will the funds be used for?

Why should NWABA award your group or team a scholarship?

What are your athletic goals?

Please send completed scholarship application to:
Northwest Association for Blind Athletes | PO BOX 65265 | Vancouver, WA 98665-0009
360-448-7254 | www.nwaba.org | bhenry@nwaba.org



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What other sources of funding have you requested? Please list name of organization, date, amount, and status. Write N/A if you have not requested funds from other sources.

What is the total budget for this request? Please attach additional pages, if necessary.

Amount Requesting_____

Number of Participants_____

Date funds need to be received_____

By signing below, I agree that the answers to the questions above are true and accurate to the best of my knowledge. I also agree that if I don't participate in the competition, or purchase the training equipment listed on the application, that I will be required to return any scholarship funds to Northwest Association for Blind Athletes (NWABA).

Signature_____

Date_____

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