

Eastern Region Association of Forest and Nature Schools (ERAFANS)

SCHOLARSHIP APPLICATION

Date submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

The following information will be used to help establish need for scholarship. This information is confidential. Applications are reviewed on a rolling basis and are first come, first serve. We want to help as many teachers as we can! Please see complete eligibility details at [www.ERAFANS.org/teacher-scholarship](http://www.ERAFANS.org/teacher-scholarship).

applicant name (first and last)

mailing address (street)

city

state

zip

email address

phone number

current employer (school or organization name)

your job title

age of children you teach

total no. of children

current employer #2 (if applicable)

your job title #2 (if applicable)

age of children you teach

total no. of children

annual salary

if you are not salaried, list hourly rate and no. of hours you work weekly

Is there anything else we should know about your work situation that relates to why you are requesting scholarship?

Are you currently enrolled as a student?

Y N

If yes, undergraduate OR graduate?

What is the highest level of education you have completed?

if you have earned a degree, please indicate your degree and major

list any other specialized training or awards you have received

title of the last professional training you attended

date of training

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How did you finance attendance to the training previously described? (choose all that apply)

paid for it myself      employer paid      included in coursework      scholarship aid      it was free

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name of professional reference #1 (current supervisor)      email address

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name of professional reference #2 (colleague or professor)      email address

I am requesting a scholarship to attend (choose top three choices):

- Natural Wonder Summit 2017
- Natural Wonder Summit 2018
- Webinar: \_\_\_\_\_
- Outdoor Learning Retreat (MD, 8/26/17)
- Outdoor Learning Retreat (NJ, 11/11/17)
- Other ERAFANS training: \_\_\_\_\_

**Answer each of the following questions in 50 words or less (per question).**

1. How did you find out about ERAFANS and/or this scholarship opportunity?
2. Why are you applying for this scholarship?
3. What do you hope to gain from attending this training?
4. Briefly tell us about your career goals (EX. job you would like to have, organization you would like to work for, etc.)
5. Provide a specific example of how this training will help you connect with young children.
6. What else should we know about your need for this scholarship?

**Submitting this Application**

Make sure you have filled out this application completely and answered all the written questions. Incomplete applications will be declined. You may only submit two scholarship applications per year, so be sure your application is complete before you send it!

We only accept email submissions. You may print a hard copy of this application, fill it out, scan and email it to us, OR you may edit this application, then save it and attach it in an email. Your email heading should read Teacher Scholarship Committee. Kindly send to: [director@ERAFANS.org](mailto:director@ERAFANS.org).

You can expect to hear back within two weeks whether we have approved or declined your scholarship. If approved, you must return the acceptance agreement within one week or your scholarship may be forfeited and given to another worthy teacher. There are many!

**Acceptance Agreement**

In exchange for this scholarship, recipients agree to provide a reflection within one week of attending the training. ERAFANS will share your reflection (written, photo or video) in a follow-up email, blog or social

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## SCHOLARSHIP APPLICATION

media post. Because the scholarships are donated by ERAFANS members, we want to show them that their donation was put to good use.