



Office use only.
Date received _____
Application # _____

BECOMING AN OUTDOORS-WOMAN™ Scholarship Application

Instructions: Please complete all sections of the application for full consideration for a scholarship to attend a Becoming an Outdoors-Woman™ workshop (BOW). Return completed form to the following address: Illinois Department of Natural Resources, ATTN: BOW Coordinator, One Natural Resources Way, Springfield, IL 62702-1271, postmarked by the deadline stated on the BOW registration form. **PLEASE SEND IN FULL WORKSHOP REGISTRATION FEE WITH APPLICATION. IF YOU ARE SELECTED FOR A SCHOLARSHIP, YOU WILL BE REFUNDED THE \$100 BY MAIL.**

Applicant Information

NAME _____ PHONE (H) _____

ADDRESS _____ (W) _____

EMAIL _____

ARE YOU A FIRST TIME BOW PARTICIPANT? YES _____ NO _____

DATE/YEAR OF BOW EVENT FALL _____ SPRING _____

I certify that the information on the application is true and accurate to the best of my knowledge and misrepresentation of any material may be grounds for ineligibility.

Written Signature

Date

Application Questions

Instructions: Use the space provided to type responses below or attach additional pages as necessary using same format.

Completed application cannot be more than five pages in length including the application form.

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1) In one page or less, explain how the Becoming an Outdoors-Woman™ experience and/or the skills learned in the workshop will benefit you personally.

2) Using one page or less, clearly state your need for financial assistance to attend a BOW workshop. Indicate any special family situations, medical problems, employment status or any other factors that may affect your financial status.