

THE TONY AND NOI GARLAND SCHOLARSHIP PROGRAM

Application Form

Date _____

Student's name _____ Age _____

Address _____

Phone number _____ e-mail _____

School now attending _____ Grade _____

Name of summer program _____

Address _____

Phone number _____ e-mail _____

Dates of program _____

Specific course of study _____

Cost of the program _____

Amount of scholarship aid requested _____

Please describe the program:

Have you attended other summer programs? If so, please list them:

On a separate page describe your interest in attending this particular program and give your qualifications for a scholarship.

Mail this application by May 1st to: The Tony and Noi Garland Scholarship Program
Island Education Foundation
P.O. Box 232
Deer Isle, ME 04627