

Adult Scholarship Application

Today's date:				
YES! We do offer full and partial needs-based entirety. <i>Please do not apply if you can afford</i>	•		,	must be filled out in its
Name:				
Address:				
City:	Phone number:			
Zip code:	Email:			
Workshop Requested:	Code:			
	Price:			
Please provide a brief statement about why y requesting this scholarship and what you hop out of this course.		par	ng for a: scholarship tial scholarship am able to pay	What is your household yearly income? Under \$25,000 \$25,000-\$50,000 \$50,000-\$75,000 \$75,000 and up

Scholarships are generally reserved for households that make less than \$25,000 a year. However, you may have reasons other than low household income that make full payment difficult. If you have added reasons for requesting assistance, please write them below:

Return to: Sarah Brown 740 University Avenue, Rochester NY 14607 Phone: (585) 473-2590 ext.110 Email sarahb@wab.org Fax: (585) 442-9333 Web: wab.org