Appalachian Artisans Guild Scholarship Application

Last Name	First name				
Address	City	State Zip			
Email address					
Home phone (with area code)	Cell phone				
Expected graduation date					
School or Homeschool Program current	tly enrolled in				
City	County				
School or program you will attend					
	Confirmation:				
I hereby affirm the information submitted	d to be true and accurate to	the best of my knowledge.			
Signature		Date			
Printed name					
Checklist for the art scholarship:					
Completed application form					
Artist's statement					
Four to eight photographs, label	ed with your name, and the	title and medium of the piece;			
If images were emailed, date of	email				
Transcript					
Self-addressed, stamped envelo	ppe, if you wish your photos	to be returned			
Mailing address: AAG Art Scholarship,	c/o Kim vonHedemann, PO	Box 518, Milford OH 45150.			
Thank you for applying for an Appalach	ian Artisans Guild Art Schol	arship. The Guild is not			

Thank you for applying for an Appalachian Artisans Guild Art Scholarship. The Guild is not responsible for lost, stolen, or damaged items.