

THE PETERSON SCHOLARSHIP FUND SCHOLARSHIP APPLICATION FORM

Name _____

Facility _____

Mailing address:

Phone: _____

Immediate supervisor or manager and their contact information: _____

This application is for:

- Myself
- One of my staff (Name/Position): _____

This application is for:

- Attending the WSSHE Annual Conference
- Attending the WSSHE Semi-Annual Conference
- Attending a conference, educational course, seminar, or other class(es)

Please list the reason why you are requesting this fund. If you are requesting the fund for anything other than to attend the Annual/Semi-Annual Conference, please give the class/seminar/course name, location, and a brief description:

For PPSF Board Use Only:

APPROVED

DISAPPROVED