



zea mays
printmaking

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Workshop Scholarship Application

Name _____

Address _____

Phone _____

Email _____

Workshop Name _____

Workshop Dates _____

Workshop Fee _____

Scholarship Amount Requested (up to 50%) _____

Gross Annual Income (Household) _____

Number of Persons in Household _____

There is a limited amount of scholarship money available. You will be notified via email or mail with the amount of scholarship available for your use.