

ELEANOR THOMAS YOUTH BURSARY

**EAC/GUILD WORKSHOP
REQUEST FOR FUNDS**

Date: _____

Name: _____ Membership #: _____

Affiliation: _____ Phone/Email: _____

Funds to attend the following workshop are requested. Funds Requested: _____

Workshop: _____

Date of Workshop: _____ City: _____

Give a brief outline of the workshop:

How will this workshop aid the Youth Chapter/Member (use the back if necessary):

I agree to submit a photo of my work and a write-up about the workshop or produce a project for YEN publication:

Youth's signature: _____

I endorse the application of the above individual:

Parent's signature: _____

Chapter Leaders's signature: _____

For Official Use: Date Received: _____ Funds Awarded: _____