

CONFERENCE SCHOLARSHIP APPLICATION



Guidelines:

1. Applicant must reside in Snohomish County.
2. Scholarship may be used for local or national Down syndrome related conference.
3. Recipient must share highlights/things learned with DSASC Board.
4. Scholarships will range between \$100-\$500 per person/family per year and event. Proof of registration required.

P.O. Box 1077  
Lake Stevens, WA 98258

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship to person with Down syndrome: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Location and Dates of Event: \_\_\_\_\_

Amount requested: \_\_\_\_\_

Estimated Costs: Registration: \_\_\_\_\_ Transportation: \_\_\_\_\_ Lodging: \_\_\_\_\_

Briefly comment on how the scholarship and attending the event will be beneficial to you-use back of form if needed. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Return form to [Lori.Schmieder@dsasc.org](mailto:Lori.Schmieder@dsasc.org) or Mail to P.O. Box 1077 Lake Stevens, 98258

