

National Association of Women Business Owners Buffalo Niagara Chapter APPLICATION FOR SCHOLARSHIP

{feel free to use an extra sheet, if necessary}

Name:			
Company:			
Address:			
City:		State:	Zip:
Phone:	E-mail:		
Fax:	Website:		
course: I have attached the The criteria for the so		The cost of the cost of the cost that I pundly address each	seminar, workshop, or of the program is \$ paid. I, explaining how you meet the
2. the member has b the time of her applic		NAWBO member	for at least two (2) years at
	ctively and consistently part at least two (2) years at the		



application:	. 50% of the NAVVBO events in the year preceding her
5. the member has been an active p needed funds for the scholarship:	articipant in NAWBO's fundraising which efforts provide the
6. the member remains a dues-payir the scholarship.	ng NAWBO member for at least two (2) years after receiving
No. of Years Member of NAWBO: Are you a dues-paying Member?	Are you a voting Member?
Additional examples of active particles your entitlement to a NAWBO school	cipation in NAWBO and/or any additional facts bearing or blarship:
_	
No. of Years in Business: Highest Level of Education and fro	m which school:
described above. Further, I agree t at least two (2) years after receivin as a member of the EORO Plannin	receiving a scholarship, I must meet the criteria to remain an active, dues-paying member of NAWBO for g a scholarship and for at least one (1) year participate ng Committee. I also understand and agree that the Directors about scholarship awards is final.
Signature	

Return application to NAWBO Buffalo Niagara, P.O. Box 1165, Orchard Park, NY 14127 or via email info@nawbowny.org