



# PI BETA PHI FOUNDATION

## ARROWMONT SCHOOL OF ARTS AND CRAFTS SCHOLARSHIP APPLICATION

Please type or print clearly. A separate sheet of paper should be used if additional space is needed. Your class preference must be indicated as listed in the Arrowmont class brochure in order for your application to be considered complete. A class schedule may be obtained from Arrowmont.

This application is for the following session (please check one): Spring \_\_\_\_\_ Summer \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ Vocation/Other: \_\_\_\_\_

College/University: \_\_\_\_\_ Undergraduate Major: \_\_\_\_\_

Graduate School (if applicable): \_\_\_\_\_ Graduate Major: \_\_\_\_\_

Are you a member of Pi Beta Phi: \_\_\_\_\_ Chapter/Club: \_\_\_\_\_ Province: \_\_\_\_\_

Please list your reasons for requesting a scholarship to attend Arrowmont and explain how you plan to use the knowledge and skills gained there if selected: \_\_\_\_\_  
\_\_\_\_\_

Could you attend Arrowmont without receiving a scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you ever attended Arrowmont? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you ever received financial assistance to attend Arrowmont in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when and what type? \_\_\_\_\_

### CLASS CHOICES

First Class Choice: \_\_\_\_\_ Date: \_\_\_\_\_

Second Class Choice: \_\_\_\_\_ Date: \_\_\_\_\_

### REFERENCES

List names of three persons well acquainted with you whom you have asked to submit letters of recommendation for you. Recommendation letters must be included for application to be considered. Recommendations must remain strictly confidential. Writers of letters of recommendation must seal and sign envelope flap to ensure confidentiality. Unsealed and unsigned envelopes will result in disqualification of the entire application.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### SIGNATURE OF APPLICANT

Signature \_\_\_\_\_

Date \_\_\_\_\_

Completed application and recommendations must be received for Spring session scholarships by January 15 and Summer session scholarships by March 15. Application and letters of recommendation should be mailed in one envelope to the Pi Beta Phi Foundation, Attention: Arrowmont Scholarship Program, 1154 Town & Country Commons Drive, Town & Country, Missouri 63017. Receipt of materials preferred as follows: flat (not folded) with no staples. **It is the applicant's responsibility to see that all materials are included in one envelope and meet the deadline.**