Walter P. Gray III Scholarship Application Form

The Walter P. Gray III Scholarship is designed to assist Society of California Archivists members in need of financial assistance. The scholarship provides up to $500 per event for members to attend SCA-sponsored continuing education workshops and other related training and educational opportunities offered in California in order to enhance their professional training.

Applicant must be a current member of the Society of California Archivists and must have limited or no access to institutional funding for continuing education. The successful applicant will be responsible for any expenses in excess of the amount of the award.

More information about this scholarship can be found in section 3-2-6 of the SCA Handbook.

FOR CONSIDERATION, APPLICANTS MUST INCLUDE THE FOLLOWING:
1. A completed application form
2. Resume or curriculum vitae
3. Brief essay (not more than a single page) describing how this workshop/class will support your educational goals and why you are requesting outside funding

Please complete this form and email it along with supporting documentation to Jennifer Martinez Wormser (jmwormse@scrippscollege.edu) with the subject line Walter Gray Scholarship.

Name: __________________________________________________________
Position/Institution: ______________________________________________
Mailing address: __________________________________________________
Telephone: ___________________ Email: _____________________________

Educational program you are applying for including class/workshop name, date, and location:
_________________________________________________________________
_________________________________________________________________

Cost of program: _________________________________

Amount you are requesting: ___________________________

How much institutional support will you receive?: _______________________
## Budget (excludes meals):

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<tr>
<th>Purpose</th>
<th>Amount ($)</th>
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<tr>
<td>Program Fee</td>
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<td>Travel</td>
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<td>Lodging</td>
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I understand and agree to comply with the obligations noted above:

Signature:__________________________________________  Date ______________________

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