



DIVISION OF VICTIM SERVICES  
TRAINING  
SCHOLARSHIP APPLICATION

*Please complete this application including any attachments and return them to:  
UW Outreach School, Office of Conferences & Institutes  
P.O. Box 3972 • Laramie, WY 82071-3972*

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

Organization/Agency you are employed with: \_\_\_\_\_  
\_\_\_\_\_

Work Address \_\_\_\_\_

Home Address \_\_\_\_\_

Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Current Position \_\_\_\_\_

How long you have been in this job? \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Attachments to your scholarship application:**

- On a separate sheet of paper, please briefly summarize (no more than one page) your current work experiences and how this training will benefit you in this position.

**Scholarship Amounts:**

- \$40.00

**For Office Only:**

Date \_\_\_\_\_ Staff approving scholarship \_\_\_\_\_

Application and summary have been received:

\_\_\_\_yes                      \_\_\_\_no

Scholarship s awarded in the amount of: \$ \_\_\_\_\_