

Brush y Canyons Chapter Texas Master Naturalist Program

Advanced Training Scholarship Request Form

Date of Application: _____

Applicant Name: _____

Email: _____

Phone Number: _____

Mailing Address: _____

1. Training Information

- Name of Advanced Training Program: _____
- Location / Provider: _____
- Dates of Training: _____
- Tuition / Fees: \$ _____
- Tuition/Fee Deadline: _____
- Amount of Scholarship Requested (partial tuition only): \$ _____

2. Eligibility Confirmation

Please check all that apply:

- ☐ I am a current Certified Texas Master Naturalist.
- ☐ I have maintained certification for the last two consecutive years.
- ☐ I am current on my chapter dues.
- ☐ I have participated in chapter meetings.

If checked, how many meetings have you attended in the last two years? _____

3. Statement of Need

Briefly explain your financial need and why you are requesting assistance.

4. Benefit to the Chapter

How will this advanced training benefit your volunteer service and the chapter?

5. Presentation Commitment

Recipients are required to share their learning with the chapter. Please describe how you plan to present what you learn (e.g., chapter meeting presentation, workshop, field demonstration).

6. Other Support

Are you receiving or applying for assistance from another source for this training?

- Yes
- No

If yes, please explain:

Applicant Signature

I certify that the information provided is true and complete. I understand that financial aid may only cover part of the tuition cost and that, if awarded, I am required to share what I learn with the chapter.

Signature: _____ Date: ____ / ____ / ____

Internal Use Only – Finance Committee Notes

Date Reviewed: ____ / ____ / ____

Committee Member(s): _____

Approved: ☐ Yes ☐ No ☐ Partial Amount \$ _____

Notes: