



**CHIPS QUINN SCHOLARS PROGRAM  
FELLOWSHIP APPLICATION**

**PLEASE TYPE OR PRINT THE ENTIRE APPLICATION**

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

<u><b>CHECK LIST</b></u>	
<input type="checkbox"/>	Cover letter
<input type="checkbox"/>	Letter from editor
<input type="checkbox"/>	Web site agreement
<input type="checkbox"/>	Resume

Chips Quinn scholar year: \_\_\_\_\_

Current employer \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**PROGRAM APPLYING FOR:**

ORGANIZATION \_\_\_\_\_

TITLE OF SEMINAR/WORKSHOP \_\_\_\_\_ DATES \_\_\_\_\_

LOCATION \_\_\_\_\_

APPLICATION DEADLINE: \_\_\_\_\_

Approved :	_____	date:_____
Enrolled:	_____	date:_____
Tuition Paid:	_____	date:_____