



AUGUSTA HERITAGE CENTER of Davis & Elkins College

Scholarship Application Guidelines

THANK YOU for your interest in the Augusta Heritage Center's Scholarship program. Scholarships are awarded for full-time Augusta workshops.

The **deadlines** for applying for all Augusta scholarships are:

Summer Session - April 1

October Old-Time Week - August 1

If you are interested in applying for a full or partial Scholarship, please complete and submit the following by the appropriate deadline:

1. **Scholarship Application Form.** If you are unable to pay any portion of the tuition, please explain on the back of the Scholarship Application Form.
2. **Letter of Recommendation.** A letter of recommendation from a mentor or teacher (other than a parent) must be submitted with the Scholarship Application.
3. **Authorization/Consent Form: For all Augusta participants under age 18.** (Not required if over 18.)
4. **Registration Form.** Please complete a Registration for the desired class, and submit it with your Scholarship Application.
5. **Additional Materials.** (optional)

Chaperone. All scholarship recipients under the age of 18 at the beginning of the workshop are required to have an adult chaperone. It is important that you read the Youth & Chaperone policy for additional details. (<https://augustaheritagecenter.org/youth-chaperone/>)

Housing & Meals. Scholarships are awarded for tuition only. The scholarship does not include housing or meals. On-Campus housing & meals can be purchased through our online registration page or on your registration form.

Nondiscrimination Policy. Davis & Elkins College does not discriminate:
http://www.dewv.edu/sites/default/files/shared/statement_of_non-discrimination.pdf

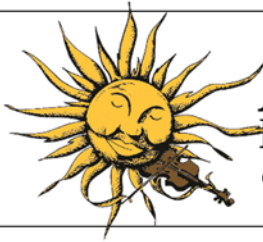
Thank you and best of luck!

Augusta Scholarship Committee

Apply online at AugustaHeritageCenter.org, or email / mail application to:

Augusta@AugustaHeritageCenter.org

Augusta Heritage Center • 100 Campus Drive • Elkins, WV 26241 • 304-637-1209



AUGUSTA
HERITAGE CENTER
of Davis & Elkins College

SCHOLARSHIP PROGRAM

Application Form

Name _____

Name on Badge _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail _____

Date Of Birth _____

Are you a previous Augusta Scholarship recipient? Y/N

Week _____

Name of Workshop _____

Workshop Leader _____

Level _____ Dates _____

Second Choice _____

If a partial scholarship is awarded, I can pay:

Half the tuition: Yes/No

\$100 of the tuition: Yes/No

Please print or write neatly. Use other side or attach an extra page if necessary.

1. Please describe your background or experience in your art:

2. What benefits do you hope to gain from this workshop?

Apply online at AugustaHeritageCenter.org, or email / mail application to:

Augusta@AugustaHeritageCenter.org

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SCHOLARSHIP PROGRAM

Recommendation Form

To be completed by a mentor or teacher
 other than a parent

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail _____

What is your relationship to the applicant?
 (Teacher, Mentor, Other?)

Name of the person you are recommending

Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail _____

Please print or write neatly. Use other side or attach an extra page if necessary.

1. Please describe your background or experience in your art:

2. Please tell us anything you would like the committee to know about this applicant's ability, character, and circumstances:

Submit recommendation online at AugustaHeritageCenter.org, or email / mail recommendation to:

Augusta@AugustaHeritageCenter.org

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Youth & Chaperone Policy

Augusta Heritage Center is always interested in “passing it on” to our youth. However, a few basic rules apply for reasons of safety and for the benefit of all who attend Augusta.

- Participants may not bring infants or children to workshops in which they are not enrolled.
- Parents/chaperones are responsible for children when the children are not attending workshops.
- Participants under age 18 must name an adult chaperone who has agreed to be responsible for them during their week at Augusta.
- **In order to stay in residence halls, chaperones not registered as participants must pay a non-refundable/non-transferrable \$150 chaperone fee.** This fee provides access to all afternoon cultural sessions and evening events. Chaperones are not considered participants and may not attend workshops. (Chaperones must complete, sign, and submit a Youth & Chaperone Form.)
- If a minor participant is staying on-campus, the chaperone must also stay on-campus in the same dorm and pay housing and meal fees.
- Children who have finished Kindergarten through 6th grade may enroll in Folk Arts for Kids.
- Older youth may enroll in adult workshops with a letter of recommendation from a teacher or mentor and if pre-approved by the Augusta Heritage Center and the workshop leader. An adult level of participation is expected.
- Minimum age requirements vary for craft workshops.

If you have any questions, please don't hesitate to call 304-637-1209 or email Augusta@AugustaHeritageCenter.org.



Authorization/Consent Form: For all Augusta Participants under age 18

TO BE COMPLETED BY THE PARTICIPANT: (Please Print or type)

I, (print participant name) _____ Date of Birth _____ will be a participant in (name of workshop) _____ at Augusta Heritage Center.

- I understand that workshops during the Augusta Heritage Center's summer season are intensive all-day workshops geared toward adults, and are not specifically designed for young people, with the exception of Folk Arts for Kids.
- I understand that the legal age for consuming alcohol in West Virginia is 21, and that Davis & Elkins College does not permit under-age drinking or possession of illegal substances.
- I understand that Augusta reserves the right to remove participants who do not adhere to campus policies or who interfere with the rights of others to benefit fully from Augusta workshops and events.

Signed (participant signature) _____ Date _____

TO BE COMPLETED BY PARENT OR GUARDIAN: (Please print or type)

Name of the adult chaperone who will be responsible for the participant during their week(s) at Augusta. This person is responsible for the participant at all times outside of scheduled workshops.

_____ Is the chaperone over 21? Yes No

What is the chaperone's relationship to the participant? _____

Will the participant room with this person while here at Augusta? Yes No

If so, where? _____

If not, where and with whom will the participant stay? _____

Will the chaperone take a workshop during the day? If so, which one? _____

If not, where can they be reached during the day in case of emergency? _____

Please list any allergies the participant has (food, bee stings, etc.). _____

Please list any medications the participant will bring. _____

Please list any other medical concerns for the participant (asthma, diabetes, recent injuries, etc.). _____

Please add any other details that might be helpful. _____

Please list an additional emergency contact (other than chaperone) for the participant.

Name (print) _____ Relationship _____

Cell Phone _____ Other Phone _____

I, the undersigned, give permission for emergency medical care for my child in the event of an emergency, and if I cannot be reached to approve treatment.

Parent/Guardian Name (please Print/Type) _____

Parent/Guardian Signature _____ Date _____