



Scholarship Application

Please download a copy of this application and fill it out. Once you are done email it to scholarships@sierraavalanchecenter.org

* Required fields

* **Name (first and last):**

* **Date of Birth:**

* **Email:**

* **Phone:**

* **Mailing Address (include city, state, and zip code):**

* **Gender:** Female Male

* **What course would you like a scholarship for?**

* **What avalanche courses have you taken previously, if any?**

* **Do you currently work as an avalanche professional? (check box for patroller, guide, pro snowmobiler, other, describe if other)**

* **For which organization, if professional?**

* **Essay Submission: (500 words or less)**

The scholarship will be awarded based upon the applicant's written response.

Please describe how this scholarship will help you personally and/or professionally? What do you hope to gain from this course, and how to you plan to use what you hope to gain?