

CAMP CANOPY
Southern Ohio Forestland Association Scholarship Application

Name:

School:

County of Residence:

Grade:

Birthdate:

Tell us about some of your interests.

How did you learn about this scholarship?

Why would you like to attend the camp?

Have you attended this camp in the past?

Would you be willing to either write about your experience at the camp or give a brief presentation at a SOFA meeting?

Please list the following information for three individuals who will give you a personal reference:
Name, contact information, how this person is acquainted with you.

Return completed form to godivapoodlesmith@gmail.com by 4/2. We will contact by 4/20..