

## Hilton Daytona Beach Oceanfront Resort 100 North Atlantic Avenue, Daytona Beach, FL

## FLORIDA'S ANNUAL STATEWIDE BROWNFIELDS CONFERENCE SCHOLARSHIP APPLICATION

Name							
	First		Middle		Last		
Address	<u></u>		Chroat				
			Street				
City		County		State		Zip Code	
Telephone		Email	Email				
Person	al Information:	scholarship (co		, —			
Does your employer offer registration reimbursem			ement?	Yes	No		
				If no, what perce	entage?		
If you would like to be considered for a scholarship based on the following criteria please check off any of the boxes that apply to you.							
	I participate in community service or belong to a non-profit entity which supports the goals of the FBA. (please specify in personal statement)						
	I am a member of a Community Based organization						
	I live in a Brownfield Area, Front Porch Community, CRA or an Enterprise Zone						
	I am a representative of a local government, state, or tribal government.						
	I am currently a student (please provide name of the educational institution you are attending as well as the year of expected graduation and major course of studies)						
Have you	ever been awarde	ed a FBA scholarshi	p before?	Yes	No If Yes,	when?	date
education tell the so	nal and career go	onal statement no als, extracurricular a tee the reasons you	activities and sh	ould incorporate a	any community se	ervice you have pe	erformed. Please
Signature						Date	
Diogga	conond by fay a r	noil or by mail NO	ATEDTUANO	SEDTEMPED 44	2040 to:		

Telephone: 850-402-2954

e-mail: info@floridabrownfields.com

Fax: 850-402-0139

Please respond by fax, e-mail, or by mail **NO LATER THAN SEPTEMBER 14, 2018** to:

Florida Brownfields Conference 1625 Summit Lake Drive #300 Tallahassee, FL 32317