



FALL  
Northern California Women's  
Herbal Symposium

Dear Scholarship Applicant, Thank-you for your interest in our Scholarship Program. We are pleased to be able to offer several full and partial scholarships for women who are unable to pay the full registration fee and who are unable to participate in the Work Exchange Program for medical or other reasons. This form helps us to get to know you and your situation better. Priority goes to women who are not well or who are recovering from illness or injury.

We will contact you by email sometime during the months

**July or August for the Fall Labor Day session.**

(please add us to your address book, so we will end up in your inbox)

Many Green Blessings,

Karen

**Fall Northern California Women's Herbal Symposium**

(707) 820 - 1054

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Occidental, CA 95465

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[www.womensherbalsymposium.org](http://www.womensherbalsymposium.org)

# Fall Northern California Women's Herbal Symposium

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Application for Scholarship • 2017

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

“I am asking for:

Partial Scholarship I can pay: \_\_\_\_\_ Full Scholarship” \_\_\_\_\_

Please explain your situation: