

Helen S. Nicholson Scholarship Application

Pennsylvania Chapter IAWP

Fax to: S. Dennis Gourley, Education Committee Chair, 412-267-1479

Member Information	
Member Name	
E-mail	
Office Phone	
Home Phone	
Home Address	
Course Information	
Course Title	
Course Description	
Course Tuition Cost	
Other Course-Related Cost (Specify)	
Course Beginning Date	
Course Ending Date	
Degree Program (If Applicable)	
Name of Institution or Course Provider	
Mailing/Billing Address	
Number of Credits/CEU's	
Payment Option	
Advance Payment Requested	
Reimbursement Payment Requested	
Applicant Signature	
Date	
Brief Explanation of How This Course Relates to Work/Promotional Opportunities	Please Attach
Chapter Administrative Use	
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Signature/Date:	
Check No.	Amount Issue Date