

Wyoming Association for Creative Youth
W.A.C.Y. AWARD APPLICATION FORM 2007-2008

Application must be received by February 1, 2008

All applicants are welcome and encouraged to apply!

Submissions may be mailed to Tammy Needham, PO Box 1134, Sundance, WY 82729.

Name (Last) (First) (Middle) _____
Home Address _____
Phone numbers Home: _____ School: _____
Social Security #: _____ Grade in School (Check one) 12th ____ College ____
Name of School _____ GPA _____
Name of Local Newspaper _____ Phone Number _____
E-mail address _____

(Optional: This will assist us in notifying you of the Scholarship Committee's decision.)

1. PROGRAM INVOLVEMENT

Number of years participating in creative problem solving (CPS) _____

Have you or your team received a creativity award? _____ If so, when? For what?

List Problems and/or Challenges you have worked and/or are working on...

(Continue on separate sheet.....)

List other Destination ImagiNation involvement, e.g. tournament official, team manager, etc.

(Continue on separate sheet.....)

2. PERSONAL INFORMATION

What College/University do you attend, or intend to attend? List preferences if more than one.

What other extracurricular activities are you involved in? Include any volunteer work.

3. SUPPORTING INFORMATION

Applicants must provide the following.

1. Enclose two letters of endorsement. One shall be from a team manager, and the other may be from a person of your choice (e.g., school administrator/educator/guidance counselor, clergy, community leader, or teammate). Letters should be one page (double spaced).
2. Essay by the applicant on the following topic. This must be double spaced and limited to two pages on: What Has Creative Problem Solving Meant to Me?

(Please give specific examples.)

4. CONSENT

Applicants must sign the following. It must be submitted on paper.

If I am a scholarship recipient, I agree to the use of my name and information contained in this application package for advertising and promotional purposes for the benefit of W.A.C.Y. without further compensation or notification. The information on this form and contained in the application package is true and correct to the best of my knowledge as evidenced by my signature.

Applicant's Signature Parent/Guardian if under 18 Date