

Scholarship Application
DEADLINE: February 16, 2005

Name _____

Address _____

Daytime Phone _____ Other Phone _____

1. What is your relationship to someone with mental illness? _____

2. Have you previously received an AMHD funded scholarship to an AMHD conference? _____
If so, when? _____

3. How would you share the information you learn at the conference with others?

4. How would you contribute to the learning process of the conference? (example: by asking good questions at the workshop)

5. The committee might require a written or oral report of your attendance. Describe how you would produce this report, what would the report look like?

Please mail application to:
Best Practices Conference Scholarship Committee
2800 Woodlawn Drive, Suite 120
Honolulu, HI 96822
or fax to (808) 539-3940