

Indiana Genealogical Society
Library Staff Educational Scholarship

(please print or type)

Applicant's Name: _____

Postal Address: _____

E-mail: _____ Phone: _____

Job Title and Description of Duties: _____

Employer's Name & Address: _____

Supervisor's Name: _____

What program do you wish to attend? _____

Describe your anticipated expenses: _____

How will this experience help you and your patrons? _____

Describe your personal genealogy research: _____

REQUIRED: 2 letters of recommendation - 1 from your employer and 1 from any genealogical/historical organization.

DEADLINE: Applications must be received by December 31 to be considered for the award given in the spring.

EMAIL APPLICATION & RECOMMENDATIONS TO: Donna K. Adams, sullivanecogen@gmail.com.