

WPPA Scholarship Application

What year did you get started in Photography? _____Part-Time _____Full-Time

What Photography, marketing or business experience do you have? _____

If you are a member of a Local Chapter, circle which one: IPPA FVPPA UPPPA

If Yes, how long? _____

Are you a PPA Member? YES _____ NO _____ If Yes, how long? _____

Are you a WPPA Member? YES _____ NO _____ If Yes, how long? _____

WPPA Membership Group: _____Portrait _____Commercial _____Art Tech _____EI

Are you a Studio Owner? YES _____ NO _____ Employee? YES _____ NO _____

Have you received any credits or awards from WPPA? YES _____ NO _____

Give name and date of last award received: _____

Are you planning to further your advancement in photography, and to achieve degree(s) from

WPPA and/or PPA? YES _____ NO _____ Comments: _____

List 2 WPPA Members as references:

NAME: _____Work Phone: _____

ADDRESS: _____Home Phone: _____

CITY: _____STATE: _____ZIP: _____

Studio Name: _____Social Security # _____

I agree to abide by the rules set forth for the "Scholarship" and that any other expenses shall be the responsibility of the Recipient. This award is not transferable and must be used by December 31, 2020.

SIGNED: _____DATE: _____

*Scholarships are open to all paid members in good standing with WPPA. This DOES include studio owners.

SEND COMPLETED FORM BY NOVEMBER 30, 2019 TO:

Tim Koll, Tim Koll PHOTOGRAPHY, 745 Sunset Drive, Waupaca, WI 54981.