John F. Gallagher Memorial Scholarship Fund

Scholarship Guidelines

1. Scholarships are available to help OYBC student members attend summer camps, workshops, classes, training programs, conventions, and other educational bird-related activities.

2. All applications must be accompanied by a 500 words, (or fewer), essay describing why you want to attend this camp and how you feel this experience will heighten your skills as a naturalist and nurture a conservation ethic.

3. Application must be signed by a parent or guardian.

4. Applications are reviewed quarterly, application submissions must be made at least four months in advance of the class/workshop/camp.

5. Send your application, essay, and letter of recommendation materials electronically to info@ohioyoungbirders.org with John F. Gallagher Memorial Scholarship Application in the subject line. Or, mail your application materials to:

   Black Swamp Bird Observatory
   Attn: Laura Guerard
   13551 W. State Route 2, Oak Harbor, OH 43449

Funds for these scholarships come from our partners, private donations, and proceeds from special fundraising events.

For more information please contact Laura Guerard, BSBO Education Director
13551 W. St. Rt. 2, Oak Harbor, OH 43449 | (419) 898-4070 | lauraguerard@bsbo.org
John F. Gallagher Memorial Scholarship Fund

Scholarship Application

Applicant Name: ____________________________________________

Street Address: ____________________________________________

City: __________________________ State: __________ Zip: __________

Home Phone: _______________ Cell Phone: _______________

Email Address: ____________________________________________

Name of Parent/Legal Guardian: ______________________________

Gender: ___________ Date of Birth: ___/___/____ Age: ___________

Present grade level in school: ___________

Event, class, or camp for which you are applying for a scholarship to attend:

___________________________________________________________________________

Event, class, or camp start date: ________________________________

Applicant’s Signature: __________________________ Date: ___________

Parent/Guardian’s Signature: __________________________ Date: ___________

Please remember to include the following with your completed Scholarship Application Form:

- Essay
- Letter of Recommendation Form and signed letter (may be mailed separately)
John F. Gallagher Memorial Scholarship Fund

Letter of Recommendation Form

Name of Applicant: ____________________________________________________________

Your Name: __________________________________________ Phone: (____) ___________

Title: ___________________________ Email: _________________________________

Street Address: _____________________________________________________________

City: __________________________ State: _________ Zip: _______________________

How long have you known the applicant? __________ In what capacity? ________________

Please attach your recommendation letter to this form and return to:

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