



Great Lakes Education Program Scholarship Request – Fall 2011

MSU Extension secured grant funds to assist classes to participate in the Great Lakes Education Program in Fall 2011. Scholarships of up to \$200.00 per class are available. All schools may apply, but priority will be given to schools which have 50% or more of free/reduced cost lunches in 2010-2011 school year.

Terms and conditions:

- Scholarship available to grades 4, 5, and 6
- Documentation of free/reduced lunch status for 2010-2011 must accompany application
- A maximum of 10 scholarships per school district unless funds are remaining. Funds remaining will be distributed to schools on a percentage basis until fund allocation is exhausted.
- Registration form and scholarship request should be sent as soon as possible. **Deposit of \$100 per class MUST be received within 30 days of reservation/scholarship request.**
- Teachers who have not already taken a Great Lakes Education Program cruise MUST attend a teacher orientation to qualify for the scholarship. Orientation date is usually in early September from 4:00-6:00pm at the MSU Extension office. If unable to attend, the teacher must set an appointment for orientation.
- Teachers agree to complete the two lessons, “Invasive Species of the Great Lakes” and “Global Climate Game”
- Scholarship request deadline to apply is June 30, 2011. Applications received after June 30 will be considered if funds are still available.
- All scholarships will be confirmed by September 1, 2011.

For questions or further information, please contact the MSU Extension office at 586-469-6440.

Great Lakes Education Program Scholarship Request

I would like to apply for the \$200.00 maximum scholarship for the Great Lakes Education Program.

Teacher name _____ Grade _____

Teacher email address _____

School _____ District _____

School Phone _____

Percent of Free/reduced lunch students _____

Documentation must be included with this application.

I have read the terms and conditions as stated above.

Signature _____

Please make a copy for your records.

Office Use Only

Date received _____

Documentation _____

Deposit received _____

MAIL: Macomb MSUE, GLEP, 21885 Dunham Rd., Clinton Twp., 48036

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