



# 2018 Scholarship Application

In order to be considered for the expense reimbursement, send a 250-500 word response to the questions below in an attached document by **4 p.m. on Friday, August 17, 2018**, to Jenny Root, SPS Chair at [JRoot@lacrossecounty.org](mailto:JRoot@lacrossecounty.org). Priority may be given to survivors, families or those planning to work in the field of mental health or suicide counseling.

First Name, Last Name: \_\_\_\_\_

Company: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

<u>Quantity</u>	<u>Description</u>	<u>Cost</u>
___	Attendee	\$90 (prior to Aug 25)
___	Student	\$50
___	Military (Active or retired)	\$50
___	Seniors (age 62 and over)	\$50
___	APA CE Hours ( <i>additional cost</i> )	\$15

**Please address the following questions in your attachment:**

- What is your interest in the topics of mental health and/or suicide?
- What is your current educational/career path and how might it relate to the conference?
- What do you specifically hope to gain from attending the conference (be specific to [conference sessions](#))?

Thank you!