

DELAWARE RECREATION AND PARKS SOCIETY
WILLIAM J. HOPKINS FELLOWSHIP
APPLICATION FORM
2006 Awards Program

DATE: _____

NAME: _____

EMPLOYER/AGENCY: _____

CURRENT POSITION TITLE: _____

Fellowship Request:

- Fellowship Funds \$ _____

- Agency/Employer Contribution \$ _____

TOTAL PROGRAM COST \$ _____

On additional pages provide the following information:

1. The training/educational program you plan to attend including the dates, sponsor, location, cost breakdown, etc. (include a copy of a brochure or flyer if possible)
2. A brief resume outlining your professional career and education
3. Your present position responsibilities
4. Your career objective
5. Reasons for requesting financial assistance
6. A brief statement/essay on "Why I should be awarded the Hopkins Fellowship"

Applicant's Signature _____

Agency/Employer Certification:

Name: _____

Title: _____

Immediate Supervisor: Yes _____ No _____

Signature: _____ Date: _____

Deadline for submission: January 27, 2006