

Massachusetts Association of Electrologists Scholarship Application

Date:

Name:

Address:

Date of Birth:

Tel. number:

email:

High School:

College:

Other:

Graduating Date from Electrolysis School:

Work Experience:

Personal Activities:

Professional Organizations:

Two References:

Give a brief explanation why you decided to enter into electrolysis

Please email a copy of your electrology School diploma OR proof of 50% of your training hours completed along with your application.

Send to: l.devin@comcast.net