

Waquoit Bay Summer Science School

Scholarship Application

Student's Name: _____

Name of Parent or Guardian: _____

Science School Session and Date: _____

Please provide a brief summary of why the student would like to attend this Summer Science School Session:

Please provide a brief explanation (specifics are not necessary) of why you are applying for a scholarship for this student:

Email to: waquoitbayscienceschool@gmail.com or send to PO Box 3522, Waquoit, MA 02536



Waquoit Bay Reserve
Summer Science School
"Learn, Explore, Protect"