

Fabric of Life & Vävstuga Weaving School 2021 Väv Immersion Application

Early Application Deadline: Friday, April 16th, 2021 Final Application Deadline: Friday, May 14th, 2021 (Acceptance and award decisions made by April 23rd and May 21st, respectively.)

Name	me: Cell Pł	Cell Phone: Home Phone:	
Addre	dress: Home		
	Email:	-	
<u>Appl</u>	plication Materials Checklist		
appli	Väv Immersion Application Form (PDF or paper cop Resume (PDF or paper copy) A letter of no more than 2 pages, explaining your ba goals (no prior weaving experience is necessary) (PD Names, telephone #s and emails of 2 character references associates, etc. Phone or video interview (to be scheduled once your fter acceptance into the program we will also require a copplication) signed by your Primary Care Physician (PDF opgram.	ckground/interest in weaving and your DF or paper copy) ences - ie. teachers, employers, business or materials have been received)	
	holarship Materials Checklist		
based	e to the generosity of the Ddora Foundation, we are absed on financial need and merit to BIPOC individuals b \$3,500 for any individual between the ages 18 - 35, base	etween ages 18 - 35 and 2 scholarships	
	 A letter of no more than 2 pages, that addresses w hardship and how you feel you would benefit from program (PDF or paper copy) 2 letters of reference that address your work ethic include contact information for any further question directly to us and separate from your application); loor relatives. 	and commitment to learning and that is we may have (PDF or paper copy sent etters must not be from family, friends,	
	 A copy of your birth certificate, license, passport or or 	ther official ID that confirms your DOB.	



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Character References

Name:	Relationship to you:	
Email:	Phone:	Years known:
Name:	Relationship to you:	
Email:	Phone:	Years known:
Payment/Refunds		
When offers of acceptance are made, a non confirm your spot in this program. The rema other arrangements have been made. Pleas	inder of the balance is due by F	riday, June 11th unless
I will pay online with my Visa/MC.		
I will mail a check.		

Please send your completed application and scholarship materials in one email to: office@fabric-of-life.org

or mail a hard copy to: Fabric of Life 47 Bassett Road Shelburne, MA 01370



Fabric of Life & Vävstuga Weaving School 2021 Väv Immersion Health Form

Health Information

(This form is completely confidential and is not used as part of our decision to accept you into this program. This form serves to support you in case of an emergency only. It should be signed by your primary care physician.)

Name:	DOB:
Emergency Contact Information	
Name:	Relation:
Address:	Phone:
Do you have any of the following conditions? Asthma	
Diabetes	Blood Disorders
Cardiac Issues	Bone/Joint Issues Mental Health Issues
Seizure Disorder/Epilepsy Taking Medications	Merital Health Issues
if yes, please list:	
Allergies that require Epi-pen or that caus	es hives. rash or difficulty breathing:
if yes, please list:	· · · · · · · · · · · · · · · · · · ·
ii yes, piease list:	
Anything else that would be helpful for us	to know?
	ly, physically, and emotionally fit to attend the Väv n and that the information provided above is correct
Signature:	Date:
Physician:	Address:
Phone	