Embroiderers' Association of Canada, Inc.
Association canadienne de broderie, Inc.

Educational Grant Application

Complete this application form and submit it with the required supporting documentation to the Education Director by April 1st .

Name: _____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

Country: _____ EAC/ACB Membership Number: _____

Email address _____

Phone number: _____

Provide a brief summary of your Embroidery Education background:

_____

_____

_____

What types of embroidery have you done in the past?

_____

_____

Why are you applying for this grant?

_____

_____

What embroidery projects, workshops or classes are available in your area

_____

_____

Which EAC/ACB Technique Study Course are you planning to enroll in?

_____

_____

Have you ever begun a Technique Study Course and not completed it? _____

If yes, please provide details.

_____

_____

Please include with this application form the following:

- A minimum of two high resolution photographs of your work with a short description of each embroidery
- Your résumé
- A letter of reference from someone who knows you. For example, your Chapter President, a designer you have taken a class from, or a past Technique Study Course counsellor.
- Any other pertinent information you feel the Education Committee should know when evaluating your application for this award.

Students who receive the Educational Grant are expected to complete the course which they have selected within the course deadline: 12 months for a basic course, 18 months for an intermediate or 24 months for an advanced course. Students who are unable to meet the timelines for submissions of lessons will not receive the remainder of the lessons for the course, will not receive a certificate of completion and course pin, and will not be eligible to apply for further education assistance from EAC/ACB. Students who re-register for the same course at a later date will not be given credit for lessons completed, and will be required to submit all lessons to the assigned counsellor.

If awarded the Educational Grant, I agree to enroll in my chosen Technique Study Course within three (3) months of notification of the awarding of the grant. I agree to be bound by the policies governing this award.

Signature: _____ Date _____

E-mail the application and supporting documentation to: education@eac-acb.ca