



PO Box 1739 | Boulder, CO 80306 | ph: 303.271.0984 | fx: 303.271.1377 | info@amga.com | www.amga.com

Scholarship you are applying for: _____

YOUR INFORMATION

NAME _____ DATE OF BIRTH _____

ADDRESS _____

WORK PHONE _____ HOME PHONE _____ EMAIL _____

CURRENT EMPLOYMENT DESCRIPTION _____

MEMBERSHIP INFORMATION

Membership level _____ Current: Yes No

Year you joined the AMGA: _____ Year you began guiding: _____ Days per year you guide professionally: _____

LIST ALL AMGA CERTIFICATIONS _____

LIST ALL AMGA PROGRAMS TAKEN (EG, A6:AGC:05): _____

PROGRAM YOU ARE ENROLLED IN (EG, S1:SGC:08): _____

AMGA SCHOLARSHIPS RECEIVED _____

QUESTIONNAIRE

PLEASE RESPOND TO THE FOLLOWING:
 Applicants are required to submit a short video (no longer than 5 minutes) describing who you are and why you love skiing. It's simple; we're looking for skiers who share the same passion that Chad had for skiing. Let us know who your are and why you love the sport, the mountains, and the endless adventure of picking lines and searching for turns?
 Videos should be uploaded to YouTube and the URL address provided in the space below.

URL OF YOUR YOUTUBE.COM VIDEO _____

REFERENCES

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 Please name two individuals who can speak specifically and knowledgeably of your current climbing/skiing skills and your future plans as a guide.

NAME _____	NAME _____
EMPLOYER _____ TITLE _____	EMPLOYER _____ TITLE _____
WORK PHONE _____ HOME PHONE _____	WORK PHONE _____ HOME PHONE _____

AGREEMENT

I hereby attest that all of the information provided is accurate and that I will, within three months of completing the program or activity for which I received funds provide a brief, written report of the course or activity to the AMGA office.

SIGNATURE _____ DATE _____

NAME (PLEASE PRINT) _____