

**The Gaylordsville Historical Society**  
**Rosemarie "Mimi" Burkhardt Continuing Education Scholarship**

The Gaylordsville Historical Society is offering a continuing education scholarship, not to exceed \$500, in the memory of Rosemarie "Mimi" Burkhardt. Mrs. Burkhardt was a long time resident of Gaylordsville where she worked as the Postmaster for over 30 years. She was a huge supporter of education and community service activities and served as an officer in the Gaylordsville Historical Society, specifically as Treasurer.

**ELIGIBILITY:**

The applicant must live in Gaylordsville, CT 06755 and has applied and been accepted in a continuing education program. Acceptable programs are not limited to college classes but also include adult education courses, vocational training, retraining programs, enrichment classes or other career enrichment programs. The applicant can not have been a previous recipient of this award.

Upon completion, (**post mark due August 15**), mail this application to:

**The Gaylordsville Historical Society**  
**Rosemarie "Mimi" Burkhardt Scholarship**  
**P.O. Box 25**  
**Gaylordsville, CT 06755**

**Applicant Information**

Name\_\_\_\_\_ Date\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ ZIP\_\_\_\_\_

Home Telephone\_\_\_\_\_ Email\_\_\_\_\_

**Scholastic Information**

Title of the program you plan to attend \_\_\_\_\_

Name of Educational Facility \_\_\_\_\_

Address\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cost of the program: \$\_\_\_\_\_

In the spaces, **and only in the spaces provided below**, answer the following. Please **do not** attach additional sheets or resumes.

Briefly describe how this award will enable you to achieve your goals.

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Please provide a few examples of life experiences that have had an influence on you.

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Community and Volunteer Service: -----

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**Declaration:** To the best of my knowledge, the information contained in this application is true and correct. I understand that this award is given for educational expenses; should I decide not to attend within the coming year, I agree to return this award to the Gaylordsville Historical Society.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_