

Colorado State Library
CALCON 2017 Small/Rural Library
Scholarship Application Form

Name: _____

Preferred mailing address: _____

E-mail: _____

Title: _____

Library/Organization: _____

Current CAL Member: Yes____ No ____

If accepted, I agree to attend all three days of the conference (October 12 – 14, 2017) and to write at least one post for the Library Learning and Creation Center about the impact of the CAL Conference on myself and my library within 2 weeks of attending the conference.

Applicant Signature

Date