



2018 Student Photographer of the Year \$2000.00 Educational Scholarship Application

Please follow the instructions below and mail to: The Professional Photographers of Washington, High School Student Photographer of the Year Award, C/O Anita Weston, 19632 12th Ave W, Lynnwood, WA 98036. Application is open only to Washington State High School Seniors graduating in 2018. Application postmarked deadline is February 14, 2018 Award will be announced in April.

- Completed application including signature of applicant and parent/guardian.
- Include two (2) letters of recommendation, with one from a Photography Instructor or mentor.
- Include a copy of school transcripts up to most recent quarter (semester).
- Submit a one-page essay. Include in this statement your future educational plans for your photographic studies and/or degrees, what photography means to you, activities outside school, workshops, awards, volunteer work or any job duties related to the photographic industry.
- Portfolio of Photographer's work. Four (4) photographic works, **all should be mounted on 8x10 mount**. Prints can be color and/or black & white; can be generated through any photographic medium (standard printing, inkjet print, Polaroid emulsion transfer or manipulation, digital imaging) as long as solely the applicant has generated the photographic images.
- On the back of each print submitted, UPPER LEFT include the maker's name, address and telephone number and the print TITLE. The print title should convey to the viewer a representative meaning.
- Include a self-addressed priority mail envelope with sufficient postage for return of all prints to the applicant. The Professional Photographers of Washington will take care with all materials submitted for consideration, but will not be responsible for any damage or loss incurred in the mail or by any other means. Prints received without return postage and envelope will not be returned.

Please note: The \$2000.00 grant will be paid directly to the chosen school after registration is verified.

APPLICANT'S NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE NUMBER _____ EMAIL ADDRESS _____

I AM A SENIOR AT (HIGH SCHOOL) _____

(PHOTOGRAPHY) INSTRUCTOR'S NAME _____

INSTRUCTOR'S EMAIL: _____

SCHOOL ADDRESS _____

CITY, STATE, ZIP _____

SCHOOL TELEPHONE NUMBER _____ CURRENT GPA _____

By submitting this application for consideration, I attest that all statements included herein are factual and all images submitted are original and have been created by me solely under my direction. If chosen to be the recipient of this award, I give permission to the Professional Photographers of Washington to exhibit my images, release my photograph and images to the press via publicity release, and publish my photography and images on their website as well as in the organization's newsletter.

Applicant's signature _____

Signature of Parent or Legal Guardian* _____

*Parent Email and Phone: _____