OHRAB Professional Development Scholarship Application

For which professional development opportunity are you applying (attach information)?

 The Society of The Ohio Loca The Academic Ohio The Ohio Mun 	Archives Conference Ohio Archivists		The Ohio Township Association The Ohio Genealogical Society The Society of American Archivists Other professional development opportunity (subject to approval):
Applicant informatio			
Name:			
Address:			
Email address: Phone:			
Applicant Affiliation:			
Organization / School:			
Role / Title / Year in S	chool:	W	/ebsite:
	-		in attending the professional development or the following eligible expenses:
Registration fee: \$			
			ated receipts, please include a cipating in the professional

300-word (maximum) summary describing how participating in the professional development opportunity you selected will improve your skills or your institution's management of archival records.

Recipients will be asked to submit a written report of their conference experience, which will be shared with the NHPRC as well as through the Board's communication channels.

2/1/2021