Instructor Advanced Education Training Grant

This $2,000 grant is open to women who are certified scuba diving instructors and have trained and certified a minimum of 25 open water divers. The purpose of the grant is to encourage instructors to expand their own underwater-related skills by taking additional training leading to certification to teach dive specialty courses, or become certified as an instructor in a diving education, skill-associated field such as CPR, O2, AED, First Aid, or earn a certificate in an industry-associated field such as chamber operation or equipment repair. The grant is not limited to these examples. Other courses that are post-instructor certification that improve or expand the instructor's dive training safety or skills will be considered. The grant may be used for single or multiple course fees and equipment needed for specialized diving or to teach the learned skill/specialty. The award may not be used for travel expenses. A report detailing how the grant was used to increase and apply new skills is required.

* Required

1. Email *

2. By entering my initials below, I certify that this is the only WDHOF scholarship or grant award that I am applying for, during this competition. *

Applicant Information

3. First Name *
4. Last Name *


5. Country of citizenship *


6. Mailing Address - Street *


7. Mailing Address - City *


8. Mailing Address - State/Province *


9. Mailing address - Country *


10. Mailing address - Postal code *


11. Phone number (please include country code) *
12. Date of Birth *

Example: January 7, 2019

13. Age (Yes, we should be able to figure this out from Date of Birth, but sometimes applicants enter the wrong year--seriously.) *

14. My preferred gender pronouns are: *
We are asking this question to determine your eligibility for this grant, which is only open to women.

Mark only one oval.

☐ She/her
☐ He/his

15. Have you previously applied for a WDHOF Scholarship? *

Mark only one oval.

☐ Yes, awarded
☐ Yes, not awarded
☐ No

Training Information
16. **Budget** *
How will the grant funds be used? Be specific. What courses do you plan to take? Where (training facility)? When? You will have until August 2023 -- 18 months from the March 2022 award date -- to use the award.

---

17. **Diving Certification and Experience** *
Please list any dive certifications and date, # of dives, and a brief description of the types of diving you’ve done.

---

18. **Other experience**
Describe other certifications and experience that are applicable to this grant.

---

**Applicant Statement**
19. **Applicant Statement** *
Why are you applying for this grant and how will you use the training in the future? Of all the women applying for this funding, why should you be selected? How will you “pay forward our investment in you” to benefit others? (up to 500 words)

---

19. **Letters of recommendation**
Two (2) recommendations are required. They may be from dive instructors, teachers, professors, employers, mentors--anyone in a position to support your application--and in particular, your ability to follow through on the training. Please ask your recommenders to email you a copy of their letters of recommendation, on letterhead stationery, if applicable. Letters must be uploaded to the application by you (and not your recommender).

Please upload letters of recommendation below.

PLEASE PAY CLOSE ATTENTION TO THE FILE NAMING FORMAT. FAILURE TO COMPLY WITH THIS REQUIREMENT MAY RESULT IN REJECTION OF YOUR APPLICATION.

---

20. **Recommender 1:** *
Please list name, email address, affiliation, number of years you have known the recommender, and in what capacity you know the recommender (e.g., teacher, dive instructor, pastor, employer, co-worker, friend).

---

21. **Upload letter from recommender 1:** *
The letter should be on letterhead/official stationery, if applicable. THIS IS IMPORTANT: PLEASE USE THIS FORMAT FOR THE UPLOADED FILE: <YOUR LAST NAME> LOR1 (for example, POMPONI LOR1). Failure to use this format may result in a deduction in your score or rejection of your application.

Files submitted:

---

22. **Recommender 2:** *
Please list name, email address, affiliation, number of years you have known the recommender, and in what capacity you know the recommender (e.g., teacher, dive instructor, pastor, employer, co-worker, friend).
23. Upload letter from recommender 2. *

The letter should be on letterhead/official stationery, if applicable. THIS IS IMPORTANT: PLEASE USE THIS FORMAT FOR THE UPLOADED FILE: <YOUR LAST NAME> LOR2 (for example, POMPONI LOR2). Failure to use this format may result in a deduction in your score or rejection of your application.

Files submitted: