

## SCHOLARSHIP PROGRAM

The awards are determined on a competitive basis and require the submission of a portfolio and Artist's Statement.

### **Eligibility:**

Any new student who is 15 years or older and planning to enroll in any of the required classes without pre-requisites in Denver Botanic Gardens' Botanical Art and Illustration program.

**Application submission:** Applicant must submit an Application Form, a portfolio comprising of four to six different artworks completed within the last two years, and Artist's Statement

### **1. Application form**

**2. Portfolio:** Each of the four high resolution (300 dpi) images must be labeled with the title of the image, date and medium. Your name should not appear on the digital image. The file name should match the name in the application form.

**3. Artists Statement:** The Artist's Statement should include the applicant's reasons for wanting to be a botanical illustrator, what the applicant wants to learn, and what the applicant's future plans are. The Artist Statement should be 400-500 words in length, typed and double spaced.

### **Deadline:**

Application Form should be submitted with the portfolio files and Artist's Statement by October 31<sup>st</sup> electronically to [SBAI@botanicgardens.org](mailto:SBAI@botanicgardens.org) or by mailing to Botanical Illustration Scholarship, Denver Botanic Gardens, 909 York Street, Denver, CO 80206. Questions may be sent by email to [mervi.hjelmroos-koski@botanicgardens.org](mailto:mervi.hjelmroos-koski@botanicgardens.org) or by phone 720-865-3653.

**DENVER BOTANIC GARDENS SCHOOL OF BOTANICAL ART AND ILLUSTRATION  
SCHOLARSHIP APPLICATION FORM (PLEASE SUBMIT ANY TIME BEFORE OCTOBER 31)**

*Please type or print clearly:*

Applicant Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Educational Information: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

By typing your name on this line, it denotes an authorized signature.

Parent's signature, if under 18 years of age: \_\_\_\_\_

By typing your name on this line, it denotes an authorized signature.

Parent's name (please print): \_\_\_\_\_

Parent's phone number: \_\_\_\_\_