

The Filson Historical Society

David Armstrong History Fellows Award

Student Information:

Name

Address

City

State

Zip

Email

Phone

High School name

Grade Level

I nominate the above student for consideration into the Dave Armstrong History Fellows Award provided by the Filson Historical Society. I endorse that this student shows an interest in history and would benefit from receipt of this award.

School Representative Name

Signature

Date

I give permission for the information above regarding my child to be collected by the Filson Historical Society. This information will be used to distribute the Dave Armstrong History Fellows Award and to mail associated publications and material.

Parent/Guardian Name

Signature

Date

Applications are accepted on a rolling basis.