

SMITHSONIAN EARLY ENRICHMENT CENTER

PROFESSIONAL DEVELOPMENT

TUITITON ASSISTANCE REQUEST

Name:

Workshop you are wishing to attend:

Organization:

Please describe the audience you interact with at your organization (age, demographic, location, size, etc.):

Please write a short personal statement about how you are hoping this workshop will positively impact your practice:

Are you willing to share about your experience with SEEC in some way after the workshop (for example, a social media post, a quote about your experience, etc.)?