



SWEDISH DOULA SERVICES
DOULA DIVERSITY SCHOLARSHIP APPLICATION
SUBMISSION DEADLINE: FEBRUARY 1ST, 2020

Personal Information

NAME _____

PHONE _____

EMAIL _____

STREET ADDRESS _____

CITY, STATE _____

ZIP _____

Race/Ethnicity

American Indian/Alaska Native

Asian

Black/African American

Latina/o

Native Hawaiian/Other Pacific Islander

White

Other: _____

I prefer not to answer

Do you identify as LGBTQ

(Lesbian/Gay/Bisexual/Transgender/Queer)?

Yes

No

I prefer not to answer

Application

1. How did you hear about the Swedish Doula Diversity Scholarship? _____
2. Do you speak any languages other than English? Please list if so: _____
3. Please address the following question in 500 words or less, and attach your response to this application:
Why do you want to complete the doula training, and how will the Doula Diversity Scholarship help you achieve your goals?

Reference Questions

Please submit 2 letters of reference attached with your application. Questions for your references are listed on the following page. Please include at least 1 letter from a professional relationship (A current or former supervisor, employer, co-worker, teacher, advisor or colleague).

Please send completed applications to Swedish Doula Services at doulas@swedish.org or by mail to the address below. If you mail your application, please confirm by calling (206)215-6106.

Swedish Doula Services
Attention: Doula Diversity Scholarship
747 Broadway, Nordstrom Tower Suite 1550
Seattle, WA 98122

Doula Diversity Scholarship Reference

NAME

PHONE

EMAIL

RELATIONSHIP TO APPLICANT

Please describe your relationship to the applicant, and how you feel their strong work ethic, interpersonal skills and reliability will enable them to be an excellent candidate for the Swedish Doula Diversity Scholarship.

Please have the applicant include your letter with their application.