



SCHOLARSHIP REQUEST FORM

Full and partial scholarships are available depending on your income/situation.

*****SCHOLARSHIP RECIPIENTS ARE REQUIRED TO ATTEND THE ENTIRE SESSION*****

Please submit Scholarship request form a minimum of 10 days before the first day of class

Student Name: _____ **Age:** _____

School: _____ **Grade:** ____ (if applying for Summer camp, last grade completed)

Parent/Guardian Name: _____

Address: _____

Parent email: _____

Annual Family Income*: _____

Has student received a scholarship from us previously? Yes No

Briefly explain the circumstances that indicate scholarship need:

For which class or camp are you registering? _____

Attach a letter and/or picture of artwork from student

**All info is kept confidential*

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DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY

Amount of Scholarship Approved: _____

Approved by: _____