



Pelham Art Center

155 Fifth Avenue Pelham, NY 10803 tel: 914.738.2525 fax: 914.738.2686 www.pelhamartcenter.org

Scholarship Application

Thank you for your interest in a Pelham Art Center class or camp scholarship. Please read the following carefully:

- Scholarships are based on financial need.
- One scholarship per term per student is allowed.
- We provide partial scholarships and require all students must pay at least 25% of the fees, which can be paid in installments.
- All information on this application is confidential.
- If you need assistance completing this form, please contact us at 914-738-2525

HOUSEHOLD INFORMATION

Please send us a COPY of either document:

- **This or last year's federal income tax form (do not send W-2's, worksheets or schedules)**
- OR**
- **Current AFDC, unemployment, disability or SSI income statements**

Is this household headed by one adult? Yes _____ No _____

Total number of children in household _____

Total number of other dependant adults _____

We award no more than 75% of the fee, can you afford more than 25% of the fee? If yes, what amount can you pay? _____

REGISTRATION INFORMATION

Name _____ Age (if child) _____

Parent/ Guardian name (if applicable) _____

Full Mailing Address _____

Telephone 1 _____ Telephone 2: _____ email: _____

Have you ever received a scholarship from Pelham Art Center? Yes _____ No _____

What term are you applying for? Fall _____ Winter _____ Spring _____ Summer _____



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Scholarship Application (CONTINUED)

List the class or camp you would like to attend:

1st choice _____ Day/Time _____

2nd choice _____ Day/Time _____

OPITIONAL DEMOGRAPHIC INFORMATION

The scholarship program at Pelham Art Center receives support from many grants. We thank these funders:

Town of Pelham, Westchester Arts Council, through county government, New York State Council on the Arts, a state agency, New York state Department of Education, through Senator Jeff Klein, Robin's Art+ Giving and Annual Fund Donors.

Many of the funders would like information about those who receive these scholarships.

You are not required to fill out this part of the application. This will not affect whether you receive a scholarship. If you are willing to provide this information, we thank you.

Are you a veteran of the US armed services? Yes _____ No _____

Are you a Senior Citizen? Yes _____ No _____

Do you have a physical disability? Yes _____ No _____

What is the ethnic heritage of the person applying for the scholarship? Check as many as apply.

- _____ Asian/Pacific Islander
- _____ European
- _____ African
- _____ Hispanic or Latino
- _____ East Indian
- _____ Native American
- _____ Other, please list _____

SIGNATURE

By signing this application you will certify that the information provided is true and correct.

Signature _____ Date _____

Thank you for your assistance!