



# Winter/Spring 2019 Class Scholarship Application

TMA offers a number of scholarships for children, teens, and adults to participate in art classes. The scholarships are intended to provide financial assistance to individuals interested in the arts. If awarded, scholarships cover 100% of class tuition.

**Only one scholarship form may be submitted per class request but multiple forms may be submitted for multiple class requests. Students applying for a scholarship cannot register for class in advance.**

**DEADLINES:** Scholarship applications for Session 1 must be received by January 6, 2019.  
Scholarship applications for Session 2 must be received by February 10, 2019.

## Applicant Information

Student Name \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_ Additional Phone \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_ Email \_\_\_\_\_

White  Hispanic or Latino  African American  Asian  American Indian  Middle Eastern  Pacific Islander  Multiracial

Gender \_\_\_\_\_

## Course Selection (Please indicate an alternate course in case your preferred course is unavailable.)

Preferred Course Title \_\_\_\_\_ Course Code \_\_\_\_\_

Alternate Course Title \_\_\_\_\_ Course Code \_\_\_\_\_

## Statement of Interest / Letter of Financial Need

Please explain why you are requesting a scholarship for a class on an additional page. Statement should be a paragraph or more and written by an adult. **If the application is for a child or teen, the letter must be written by a parent/guardian. Teacher recommendations are welcome in addition to the parent/guardian letter.**

### **Please check that the following items are completed and included before submitting:**

- Scholarship Application completed and signed
- Statement of Interest / Letter of Financial Need attached

If awarded a scholarship, you agree to the following terms: to encourage and support the student named above as he or she attends classes, to arrange transportation to and from classes, to make sure the student attends each class meeting, and to inform the office if the student will miss a class meeting.

Student Name (print) \_\_\_\_\_ Parent/Guardian Name (print) \_\_\_\_\_

Student/Guardian (if student under 18) Signature \_\_\_\_\_ Date \_\_\_\_\_

*Applications submitted in full will be reviewed following the deadline date for the selected course. If the application is missing an appropriate course selection from the current catalog or the Statement of Interest / Letter of Financial Need, it cannot be reviewed. All communication regarding application status will be via email if an email address is provided on the application form.*

**Please mail completed form and statement to:**  
The Toledo Museum of Art  
Attn: Sara Daniels  
P.O. Box 1013  
Toledo, OH 43697

Or e-mail to: [sdaniels@toledomuseum.org](mailto:sdaniels@toledomuseum.org)  
Or fax to: (419) 255-5638 Attn: Sara Daniels