



# Winter/Spring 2020 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.

**Students applying for a scholarship cannot register for class in advance.**

**DEADLINES:** Scholarship applications for Session 1 must be received by ~~Jan. 5, 2020~~ **EXTENDED to Jan. 10, 2020.**  
Scholarship applications for Session 2 must be received by **Feb. 9, 2020.**

## Applicant Information

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

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

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

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

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

Gender \_\_\_\_\_

## Course Selection

Please indicate the preferred course request below. List an alternate course in case the preferred course is unavailable. If you have multiple course requests, please submit a separate application form for each request.

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

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

## Letter of Financial Need / Statement of Interest

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

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

- Scholarship Application completed and signed
- 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 preferred course. **If the application is missing an appropriate course selection from the current catalog or the Letter of Financial Need / Statement of Interest, 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: Art Classes  
P.O. Box 1013  
Toledo, OH 43697

**Or e-mail to:** [classes@toledomuseum.org](mailto:classes@toledomuseum.org)  
**Or fax to:** (419) 255-5638 Attn: Art Classes