

NEWPORT·ART·MUSEUM

Student Scholarship Form: Adult Application

Student Information:

Today's Date: _____

Name: _____ Age: _____

Address: _____ Male/Female: _____

City & State: _____ Zip Code: _____ SS#: _____

Phone: _____ E-mail Address: _____

For Statistical Purposes Only, Please Circle One (Optional): African American Asian Caucasian Hispanic/Latino Native American Multi-Ethnic

Employment Information:

Are you currently employed? Yes (full time) Yes (part time) No

Company: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Class Requested

First Choice:

Name of Class: _____ Instructor: _____

Dates of Class: _____ Day: _____ Time: _____ Total Cost of Class*: _____

Second Choice:

Name of Class: _____ Instructor: _____

Dates of Class: _____ Day: _____ Time: _____ Total Cost of Class*: _____

Third Choice:

Name of Class: _____ Instructor: _____

Dates of Class: _____ Day: _____ Time: _____ Total Cost of Class*: _____

* Include regular tuition (without early registration discount) and studio fees; members use member rate.

Amount of scholarship requested:

Scholarship funds are limited; please indicate if you can contribute towards the tuition amount.

___ Requesting full scholarship

___ Requesting partial scholarship; amount that you can contribute: \$ _____

* Include regular tuition (without early registration discount) and studio fees; members use member rate.

Supporting documents:

Check off and enclose copies of the following documents. **Incomplete applications will not be processed.**

____ A brief statement expressing the reasons why you want to attend an art class at Newport Art Museum Coleman Center for Creative Studies.

____ A copy of your 2009 tax return or statement of income/eligibility from a social services agency, housing authority or other related institution verifying your income status.

You may also include a sample of your artwork (optional)

I attest that the information provided on this form is true to the best of my knowledge. _____

Applicant Signature: _____

Date: _____
