

ART ANGEL FINANCIAL SCHOLARSHIP APPLICATION

Middletown Art Academy - the Art Angel financial scholarship 2013 is made possible due to individual supporters of the arts. In the interest of providing a creative sanctuary and helping future artists understand themselves and reach their highest potential, to nurture, to guide and to educate local talent of all ages with financial difficulties in the North End Middletown, CT. To ensure that scholarship reach those genuinely in financial need, we ask that you and/or parents/guardians exercise accuracy and honesty in filling out this form. There is a very limited amount of resources available for financial scholarships. Full & partial scholarships are awarded based on the strength, quality, and potential of the applicant's artwork and their financial need. As limited spots are available, application does not guarantee assistance. Applications will be held in confidence.

APPLICANTS MUST SUBMIT THE FOLLOWING: Incomplete submissions will not be processed.

- Financial Scholarship Application Form, completed in full
- Proof of income for both spouses and/or partners (most recent Tax Return Summary)
- Child's recent art work **minimum 5 art pieces** maximum 10
- Short letter written from child to Art Angel explaining why they want to attend art academy
- A \$15 non-refundable MONEY ORDER payable to Middletown Art Academy is required (one per family)

Please mail to:

Middletown Art Academy
Attention: Art Angel
504 Main Street Suite South-3
Middletown, CT 06457

Allow 4-6 weeks for processing. Applicants will be notified by mail and or email.

PERSONAL & EMPLOYMENT INFORMATION

Please indicate the class name for which you are applying:

1. _____ 2. _____ 3. _____

Please indicate the Program name for which you are applying:

1. _____ 2. _____ 3. _____

Circle one please: Enter me for Art Angel Fine Art Competition Only **or** Enter me for Both Art Angel Scholarship & Art Competition

size: _____ medium used: _____

Student Name: _____ Birth date: _____

Home Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Private Line: _____

Students Email Address: _____

Name of your School: _____ Grade: _____

School Address: _____ City: _____ Zip Code: _____ School Phone: _____

Name of Parent (1): _____ Email: _____

Place of Work: _____ Occupation: _____ Work Phone: _____ Cell Phone: _____

Name of Parent (2): _____ Email: _____

Place of Work: _____ Occupation: _____ Work Phone: _____ Cell Phone: _____

ANNUAL HOUSEHOLD FAMILY INCOME: Circle one please UNDER \$10,000 \$10,000 to \$20,000 \$20,000 to \$30,000

\$30,000 to \$40,000 \$40,000 to \$50,000 \$50,000 to \$60,000 \$60,000 to \$70,000 \$70,000 to \$80,000

MONTHLY FAMILY EXPENSES: _____ How many persons does this income provide for? _____

Describe any special circumstances or additional information. (attach pages if necessary)

I certify that the information stated above is true and accurate.

Signature of Applicant: _____ Date signed: _____