



davis **arts** center

Davis Arts Center Scholarship GUIDELINES

Thank you for your interest in the Davis Arts Center Scholarship Program. We are committed to helping students of all ages and income levels pursue artistic interests. We are proud to offer the Davis Arts Center Scholarship, which helps fund all classes for all ages, and the Arthur C. Heehler Scholarship, which offers funding for adult creative writing classes.

Please note the following guidelines before completing the application:

- 1. Scholarships are awarded on the basis of need for one class at a time.** When deciding which class to apply for, keep in mind that some classes are meant to be taken on a continuous basis for full appreciation (e.g. ballet, martial arts). Classes that may be enjoyed for one session only include clay, weaving, multimedia art, music and theater.
- 2. Scholarships may not cover the full cost of the class.** Funds are limited, so the scholarship award may not be enough to pay for the entire registration and supply fees. You are responsible for any remaining costs beyond the applicable scholarship amount.
- 3. Please indicate a second and a third class choice on your application, if possible.** If we approve your scholarship application, but your first class choice is full or canceled, we will make every effort to secure enrollment in your second or third choice classes.
- 4. Scholarship applications are due at least 3 weeks before the start date of the class desired.**

Please send completed applications via email to office@davisartscenter.org, drop off in person at the Davis Arts Center front office or via mail to:

**Davis Arts Center
P.O. Box 4340
Davis, CA 95617**



Davis Arts Center Scholarship APPLICATION FORM

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STUDENT'S NAME: _____ BIRTHDATE: _____

STREET ADDRESS: _____ PHONE: _____

CITY & ZIP CODE: _____ EMAIL: _____

PARENT/GUARDIAN: _____

CLASS REQUEST *(Please Include Class Prices)*

1st CHOICE: _____ PRICE: _____

2nd CHOICE: _____ PRICE: _____

3rd CHOICE: _____ PRICE: _____

NUMBER OF PERSONS IN HOUSEHOLD: _____ MONTHLY INCOME AFTER TAXES: _____

STUDENT'S INTERESTS & ACTIVITIES: _____

EXPLAIN NEED FOR SCHOLARSHIP AND REASONS WHY STUDENT WANTS TO TAKE THE SELECTED CLASS

SPECIAL NEEDS, IF ANY: _____

SIGNATURE of applicant or guardian **NAME (printed)** **DATE**

Office Use Only:

Received date: _____ Received by: _____ Student in Altru?:

Scholarship amount: _____ Date awarded: _____ Declined: _____

Contacted: _____ Registered date: _____ Registered by: _____