

## **Scholarship Application**

To provide access to quality art education, the Currier offers full and partial tuition scholarships on an individual and family needs basis. Please mail this form to the Currier Museum of Art, 150 Ash Street, Manchester, NH 03104 or scan and email to <a href="mailto:classes@currier.org">classes@currier.org</a>, for more information call 603.518.4922

Name of Applicant:			
Are you applying for yourself or a ch	hild in your household?	☐ Myself ☐ Child	
Name of Student(s):			Age of Child:
			Age of Child:
Street Address:			
City:	State:	Zip Co	ode:
Phone Number: () -	Email:		
Class Name and Date: 1st Choice:			
Class Name and Date: 2 <sup>nd</sup> Choice			
Number of Adults in Household:	Numbe	r of Dependents	in Household:
Total Gross Income per Year* (before	re taxes & deductions):		
Were you referred to us by a social se	ervices organization or schoo	ol? □ Yes □ No	
If yes, please provide the name of the re	eferring agency and contact n	ame:	
Are there any financial circumstance			
•			
Emergency Contact: Phone Number: ()			
I agree that the information provided is attend class. Scholarships funds are awa federal poverty guidelines. Families wit	correct. I will be responsible farded each semester. Scholarsh th an annual gross income of 2	for ensuring that the hips are based on 1 200% or less of the	ne student receiving the scholarship will need using the current year's annual
The Currier Museum of Art will notify please contact us at 603.518.4922 or em		holarship applicati	ion via email. If you have any questions,
Signature:		Date: _	
Office Use Only:  Approved:   Yes  No Amount of S			es <b>Date</b> :
Ralance Due Refore 1st Class: \$			