

# Adult Education Scholarship /Financial Assistance Application

1. Full or partial scholarships are available to students hoping to attend classes or workshops at Saratoga Arts
2. The application must be complete and true
3. Completed applications can be mailed to Kate Morse, Director of Education - 320 Broadway, Saratoga Springs NY 12866 or submitted electronically to [kmorse@saratoga-arts.org](mailto:kmorse@saratoga-arts.org)
4. Applications take 1-2 weeks to process

## **Personal Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Under 15,000    | <input type="checkbox"/> 15,000 - 25,000 | <input type="checkbox"/> 25,000 - 40,000 |
| <input type="checkbox"/> 40,000 - 50,000 | <input type="checkbox"/> 50,000 - 70,000 | <input type="checkbox"/> Over 70,000     |

## **Please provide a brief summary of your financial situation:**

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## **Class Information:**

Class you wish to take: \_\_\_\_\_

Total Cost: \_\_\_\_\_ Dates: \_\_\_\_\_

**By signing below, I affirm that the information I have provided is true and correct:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*This information is requested solely for purposes of evaluating your application for a Saratoga Arts Community Arts Education Program*

*Scholarship, and will be kept confidential.*