

Scholarship Application Form

45 Pershing Avenue, Poughkeepsie, NY 12601 Tel: 845-471-7477 Email: <u>abby@thearteffect.org</u>

This form must be filled out completely with the correct information in each field in order to be considered. Be sure to review your form to be sure it is complete before submitting.

Please Note: Scholarship Application Deadlines: Summer apply by April 15th, 2024 Fall apply by September 1st Spring apply by February 1st (notification will be 2 weeks after deadline)

Please complete all fields and return to The Art Effect via email, mail or in-person

Name of Applicant (student)		Age	DOB
School Attending	Current Grade		
Address		_ City	_ State Zip
Guardian #1		_ Relationship to Applicant	
Phone	Email		
Guardian #2 (if applicable)		Relationship to Applican	t
Phone	Email		

Due to high volume, we cannot guarantee that you will be approved for multiple sessions/programs, please list the weeks/courses you are most interested in receiving support for in your order of priority.

Please be sure to include Full Program Title and the session you are applying for (ex. Full Program Title, Spring 2024). If you are applying for aid towards a camp be sure to clarify the camp's title and week (ex. Dutchess Art Camp, week 1).

Please note: Summer Art Institute classes are not considered camps, please be sure to clarify the class name and the session you are applying for (ex. Full Course Title, Session 1)

For which program(s) are you applying?

Due to limited funds and high scholarship demand, we typically award partial scholarships and kindly request that you specify the amount you can contribute towards tuition.

Specify the amount you are able to pay towards tuition:	

Has the applicant attended The Art Ef	ect previously? Yes	sNo If yes, when?
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Has the applicant received a scholarship to The Art Effect previously? Yes	No It y	/es, when a
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Be sure to answer the following question regarding financial standing. We understand that some may not be comfortable sharing this information but in order for this process to remain as equitable as possible this question must be answered.

Do you currently receive any of the following:

HEAP SNAP WIC TANF

According to your family size and the Federal Poverty Guidelines Chart provided, your total family income is: Above At Below the income level indicated

Falling at or above a certain income level does not exclude you from being eligible for scholarship. This information helps determine our success reaching low-income families.

Family Size	Monthly Income	Annual Income
1	\$ 2,430	\$ 29,160
2	\$ 3,287	\$ 39,440
3	\$ 4,143	\$ 49,720
4	\$ 5,000	\$ 60,000
5	\$ 5,857	\$ 70,280
6	\$ 6,713	\$ 80,560
7	\$ 7,570	\$ 90,840
8	\$ 8,427	\$ 101,120

Parent/Guardian Signature _

Date ____

Students selected to receive a scholarship may have their photo, artwork, and story used for fundraising and promotional purposes with permission.