

## Scholarship Application Form

(Please submit one application per student.)

Today's Date: \_\_\_\_\_

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

Contact Information for Person Submitting This Application:

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

Phone Number: \_\_\_\_\_

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

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

Has this student taken classes with us before? YES / NO

Does Student have any allergies? \_\_\_\_\_

How did you hear about our class or program? \_\_\_\_\_

Please list which class or program you are applying for scholarship for. Please note that a maximum annual benefit of \$100 can be awarded per student.

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How would being awarded a scholarship benefit your student/family?

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Please turn-in to Guest Services at the museum's front desk, email to [guestservices@sdc-arts.org](mailto:guestservices@sdc-arts.org), or mail to Sangre de Cristo Arts Center, Attn: Guest Services 210. N. Santa Fe Ave, Pueblo, CO 81003.