



DURANGO ARTS CENTER  
NEED-BASED SCHOLARSHIP APPLICATION  
DAC APPLAUSE

**CURRENTLY ACCEPTING SCHOLARSHIP APPLICATIONS:**  
***Make Way for Mondays on Main, 2017-18***

The Durango Arts Center provides **need-based scholarships** to students thanks to generous individuals and support from the Boone Fund, Community Foundation serving Southwest Colorado, Durango Education Foundation, Durango Friends of the Arts, Durango Motor Company, Durango Silverton Narrow Gauge Railroad, Intelligent Investment Management, Pediatric Partners of the Southwest, Red Scarf Shots and the Martin Family Fund.

**In assessing scholarship requests, we ask that your child submit either a written paragraph or drawing that describes why they are interested in attending a DAC education program.** Honoring confidentiality, children’s name will be withheld – this information will be shared with donors to further illustrate the impact of their funding.

**Upon receipt of your complete application, you will be notified regarding the level of scholarship support DAC can provide to assist with your child’s arts education experience.**

Complete this form including all questions and attach your child’s image/ writing sample and return to  
Emily Simpson Grandt, DAC Applause Program Director (Performing Art Classes)  
802 E. 2<sup>nd</sup> Avenue, Durango, CO 81301  
[Emily@durangoarts.org](mailto:Emily@durangoarts.org)

**Student’s Name:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Student Age:** \_\_\_\_\_ **Student Grade in fall 2017:** \_\_\_\_\_ **School:** \_\_\_\_\_

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

**Telephone Number(s):** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Have you received scholarship assistance for other DAC classes?**  Yes  No  Unsure

**If yes, please list the classes and amount of past scholarship assistance:**

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**Combined Annual Income from ALL sources \$** \_\_\_\_\_

Please include: **Earnings** (Salary, Wages, Commissions, etc.), **Agency Subsidy** (Welfare, Social Security, etc.) and **Other** (Alimony, Child Support, etc.)

**Please list the number of adults living on the income represented above:** \_\_\_\_\_

**Number of children living in the household:** \_\_\_\_\_

**Are there any special circumstances we should be aware of in determining financial assistance?**

**Requested amount of Scholarship Assistance:**

\_\_\_\_ 25%    \_\_\_\_ 50%    \_\_\_\_ Other: \_\_\_\_\_

**Do you have time to volunteer with the Durango Arts Center?** \_\_\_\_ YES    \_\_\_\_ NO

I certify that the information contained herein is true and complete to the best of my knowledge.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_