



## 2018 SUMMER CAMPS NEED-BASED SCHOLARSHIP APPLICATION

DAC APPLAUSE PERFORMING ARTS  
VISUAL ART CAMPS  
G.O.A.L. (Girls Opportunities through Arts & Leadership)

**DEADLINE:** May 15, 2018

The Durango Arts Center provides **need-based scholarships** to students thanks to generous individual donors and support from the Boone Fund, Coca-Cola Durango-Farmington, Community Foundation serving Southwest Colorado, Durango Education Foundation, Durango Friends of the Arts, Durango Motor Company, Durango Silverton Narrow Gauge Railroad 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  
Sandra Butler, Education Director (G.O.A.L. / Visual Art Classes)  
Emily Simpson Grandt, DAC Applause Program Director (Performing Art Classes)  
802 E. 2<sup>nd</sup> Avenue, Durango, CO 81301  
[Sandra@durangoarts.org](mailto:Sandra@durangoarts.org) or [Emily@durangoarts.org](mailto:Emily@durangoarts.org)

**Student's Name:** \_\_\_\_\_

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

**Student Age:** \_\_\_\_\_ **Student Grade in fall 2018:** \_\_\_\_\_ **School:** \_\_\_\_\_

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

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

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

**Which summer camp would your child like to attend?** \_\_\_\_\_

**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 \_\_\_\_\_