

Art Outreach's Scholarship Application Form

Thank you for your interest in Arts Outreach's programs. Our goal is to make our programs as accessible to as many families as possible. Please return your form and supplemental information as soon as possible. **Your application will be reviewed impartially and confidentially.**

Father/Guardian

Mother/Guardian

Name _____

Name _____

Mailing Address _____

Mailing Address _____

Residence Address _____

Residence Address _____

Home Phone _____

Home Phone _____

Employer's Name _____

Employer's Name _____

Work Phone _____

Work Phone _____

Name(s) of child(ren) who will be attending Arts Outreach's programs.

Name	Age	Program(s) Attending	Date(s)

Family's monthly wages \$ _____/mo.

Other income (rental income, child support, etc.) \$ _____/mo.

Monthly expenses (mortgage/rent, groceries, gas, utilities, auto payments) \$ _____/mo.

Childcare expenses for non-school age children \$ _____/mo.

How much will you contribute to pay for this program? \$ _____

Are there any other factors we should take into consideration in evaluating your application? Please use the other side of this form to provide us with any further information you think is relevant.

Scholarship applications must be accompanied by the following information:

**Last 2 pay stubs and/or proof of public assistance
AND the most recent year's federal income tax form.**

Include copies for all individuals contributing to household income.

Please submit the completed form along with your documents (if required) to:
Sandie Mullin, Executive Director, Arts Outreach, P.O. Box 755, Los Olivos, CA 93441

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