

Chester County Art Association

Scholarship Application: West Chester Facility



Contact assistant@chestercountyarts.org with any application questions.

CCAA's Scholarship Policy: An award of a scholarship is not a guarantee of attending the specific class/camp requested. Each CCAA program must have a minimum number of paid participants or it cannot run. This policy applies equally to every program and every student who registers. If a class/camp is canceled, every effort is made to place the registered students in another program within the same medium and a similar day/time slot. When possible, registered students will be offered a choice of programs.

Application Date: _____ Circle One: **CAMP** **CLASS**

Full Name of Requestor: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____

Cell Phone: _____

Requestor's Relationship to person/child/children listed below: _____

Name of person/child/children who will use this scholarship, if granted: _____

Name, week and cost of camp(s) or class(es) you are requesting:

1st choice: _____

2nd choice: _____

3rd choice: _____

How much are you able to contribute towards the tuition? _____

Has anyone in this household received a scholarship from CCAA in the past? _____

If yes, please give details.

List all persons living in this household (use extra sheet, if needed)

Full Name	Date of Birth	Age	Sex	Relationship to Requestor

List all monthly incomes within the Household by each job and wage earner. (Provide pay stubs from most recent 2 months for each job/ each wage earner and a copy of most recent tax return.)

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Please list any subsidies currently being received by anyone in the household: assistance with food, medical costs, housing costs, etc.

Is anyone in the household receiving alimony or child support? _____

Is there any other monthly income not yet listed? _____

Please list all current monthly expenses for the household:

<i>Name of expense</i>	<i>Amount</i>	<i>Name of expense</i>	<i>Amount</i>
Mortgage		Vehicle Payment(s)	
Rent		Vehicle Insurance(s)	
Electricity		Credit Card Debt(s)	
Gas		Other Loan(s)	
Heating Oil		Parole Fees	
Water		Court or Legal Fees	
Landline Phone(s)		Paying Alimony	
Cell Phone(s)		Paying Child Support	
Internet Services			
TV Services			
Food			

List all vehicles for this household:

Year	Make	Model	Year Acquired	Amount owed, if any

Has anything happened recently causing a financial hardship and making it difficult to pay the camp tuition? If yes, please explain briefly.

Is there anything else you would like us to consider while reviewing your application for a scholarship?

Requestor Signature: _____ Date: _____
Signature implies your understanding and acceptance of CCAA's scholarship policy.

CCAA Initial Review: _____ Date: _____

CCAA Executive Director Final Review: _____ Date: _____