SCHOLARSHIP APPLICATION

The Cleveland Museum of Art is awarding partial scholarships for this summer’s CMA Creativity Camps based on need and merit. Please complete this scholarship form and email it to familyyouthinfo@clevelandart.org with the subject line “CMA Creativity Camp Scholarship Application.” All applications for this summer’s camps are DUE BY FRIDAY, MAY 1, 2020. Award notifications will be made by no later than Friday, May 15, 2020.

Camper Name(s): _____________________________________________________________

Camper Birthdate(s): ______________________________________________________

Parent/Guardian Name(s): __________________________________________________

Street Address: ____________________________________________________________

City & Zip Code: ____________________________________________________________

Email Address: _____________________________________________________________

Primary Phone Number: _____________________________________________________

How did you hear about CMA Creativity Camps?

☐ Family/Friends ☐ At the Museum (Signs or Staff Member)

☐ Digital Communications ☐ Advertisement

☐ Museum Member Magazine ☐ News Story

☐ Other ______________________

Has your child received a scholarship at The Cleveland Museum of Art in the past?

________________________________________________________________________

________________________________________________________________________

What is your annual household income? ________________________________

Total number of individuals in household: ________________________________
Class choice:

1st Choice Camp Title:

1st Choice Camp Dates:

2nd Choice Camp Title:

2nd Choice Camp Dates:

Please let us know why you are applying for a scholarship to CMA Creativity Camps:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

By signing below acknowledge that I have completed all applicable information requested accurately and to the best of my ability. I understand that completion of this application does not automatically qualify me for assistance. Requests are subject to review based on need and availability of scholarship funds.

Parent(s)/Guardian(s) Signature: _________________________________ Date: _____________

If you have any accompanying documents to show need, such as discounted utility programs, college class registration, etc, please include with application, if possible. We also accept documents to show merit, such as a letter from an art teacher vouching for student interest.

Please submit completed applications by email to familyyouthinfo@clevelandart.org.