

ART STUDENTS LEAGUE OF DENVER

Scholarships for Youth Ages 5 – 18 Guidelines and Application

The Art Students League of Denver (ASLD) will award scholarships, when available, to attend our Saturday morning or afternoon visual art classes or workshops for youths from age 5 through 18. The intent of these scholarships is to provide equal access to education in the visual arts to youth who have a strong desire to learn, but lack the financial means to afford our classes.

Eligibility requirements:

Household Income Limits 2008-2009	
Family Size	Gross Monthly Income
1	\$1,475
2	\$1,978
3	\$2,481
4	\$2,983
5	\$3,486
6	\$3,988
7	\$4,491
8	\$4,993
each additional person	\$503

Each scholarship includes: 3 months of visual arts education to be held Saturday mornings from 9:00 A.M. to 12 Noon; the use of League art supplies; and membership in ASLD for one year. The League reserves the right to award scholarships at its own discretion. There is no cash value for scholarships, and we do not offer credits or transfers.

Scholarships do not include transportation to and from the ASLD or snacks. Applicants must be Colorado residents. You may apply for a scholarship at any time. Submit applications to the ASLD address below. Awards will be made as applications are submitted, based on space available and until all funds are used. Recipients and their instructors may be asked to complete an evaluation after completion of the scholarship.

Application

CHILD'S NAME: _____

PARENT'S/GUARDIAN'S NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____ CHILD'S AGE: _____

PHONE: _____ EMAIL: _____

What is your annual household income? _____

How many family members are part of your household? _____

Do you qualify for any government programs (food stamps, medicaid, etc.) Yes No

If yes, please indicate which programs and how much subsidies you receive.

Have you received a scholarship from the Art Students League before? Yes No

If yes, when and what was the amount:_____

Have you received scholarships from other schools? Yes No

If yes, when and for how much:_____

Please list three classes (in order of preference) from our schedule that you are interested in taking:

- 1.
- 2.
- 3.

When would you like to start the class?

In order to receive grant awards from many of the foundations which fund our scholarship program, it is required that we track the ethnicity of our scholarship students. Thank you for indicating your ethnicity or cultural background.

Caucasian African American Asian Hispanic Latino

Native American Other Please specify:_____

Do you have access concerns or do you require special accommodations in order to participate? The Art Students League will do everything possible to accommodate your needs.

yes no

If yes- please explain

Why do you want to take a class at the Art Students League of Denver?

To apply or answer your questions, please contact our Scholarship and Model Coordinator, Clare Puskarczyk, during her work hours at the League: 5:00 pm – 9:30 pm, Monday through Thursday. She can be reached at (303) 778-6990, ext. 151, or email her at model_coordinator@asld.org. You may also come to the League office, 200 Grant Street, Denver CO, 80203.

As part of the application process, if you qualify, you will be invited for an interview. Thank you for inquiring about the scholarship program at the Art Students League of Denver.

Signature

Date

Office Use Only

Art Students League Staff

Amount Awarded-Class and Membership

Scholarship Fund

Amount Awarded-Supplies

Date Awarded