

Adult and Youth Program Scholarship Application



- Scholarships are reviewed by the staff and the Education Committee.
- Decisions are made on a case-by-case basis, determined by need, availability, and donations.

PLEASE NOTE: ALL COMPONENTS OF THIS FORM MUST BE COMPLETED TO BE CONSIDERED!

General Information:

Student's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Email: _____

This section is for any student under the age of 18.

Age: _____ Current Grade: _____ School: _____

Does your child qualify for free or reduced lunch? Yes _____ No _____ (If yes, which?): _____

Parent's / Guardian's Name(s): _____

Scholarship Information:

Have you ever received a scholarship from the Emerge Gallery & Art Center before? Yes _____ No _____

Annual Household Income: _____ Number of children in the Household under 18: _____

Place of Employment: _____

In the space provided below briefly address why you are seeking a scholarship: _____

*** Please attach one of the following: recent pay stub, unemployment verification, or last year's W-2 form.**

Application Continued on Reverse Side

Reference Information:

How did you learn about our scholarship program? Website ____ Flyer/Brochure ____ School Counselor ____

Social Worker ____ Emerge Staff ____ Other (please specify): _____

Please list the name and contact information for three references. One must be from either a teacher, school counselor, school social worker, or a representative from an agency who works or has worked with your child:

Professional Reference

Name: _____ Title: _____ Phone: _____

Second Reference

Name: _____ Relationship: _____ Phone: _____

Third Reference

Name: _____ Relationship: _____ Phone: _____

Registration Information:

Please list the class, camp, or program you are interested in below. You may list up to three choices in order of preference. *Please note: We will do our best to fit a scholarship recipient in their first choice, but placement depends upon availability, and the number of applications we receive. Thank you for understanding.*

Choice # 1: _____

Choice # 2: _____

Choice # 3: _____

Occasionally, we will have last minute opportunities open up for participation in classes, workshops, camps, etc. Do you wish to be contacted should these opportunities become available? Yes _____ No _____

Signature: _____

If under 18 years of age must be signed by parent or legal guardian.

Date: _____

Please return applications to:
Emerge Gallery & Art Center
404 S. Evans St., Greenville, NC 27858

Contact Paula Rountree, Programs Director, by phone (252) 551-6947 or email paula@emergegallery.com for more information.

PLEASE NOTE: You must fill out a separate class registration form and sign the liability waiver in order for you or your child to participate in programs here at the EmERGE Gallery & Art Center. Thank you for understanding.