



CAROLINE COUNTY  
COUNCIL OF ARTS

P.O. Box 292  
401 Market St  
Denton, MD 21629  
Phone: (410)479-1009  
info@carolinearts.org  
www.carolinearts.org

Heart of the Arts in Caroline!

### Tuition Assistance / Scholarship Application

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Phone(s) \_\_\_\_\_

Do you live in Caroline County? **Yes** or **No** Are you Currently Attending School? **Yes** or **No**

What grade? \_\_\_\_\_ Where? \_\_\_\_\_

Have you ever taken any classes or attended any events held by the Caroline County Council of Arts?  
If yes, please list them. \_\_\_\_\_

Have you ever taken any art classes or workshops elsewhere? Please describe. \_\_\_\_\_

What classes at The Foundry do you plan on attending? Please list all that apply. \_\_\_\_\_

What classes would you like to see us have in the future? \_\_\_\_\_

Annual household income: \_\_\_\_\_ Number of people in household: \_\_\_\_\_

Are you able to pay a portion of class costs? If so, how much? \_\_\_\_\_

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*(If applicant is under 18)*

*All information provided is kept confidential by CCCA and will never be shared with any outside individuals, businesses or other entities. The information you provide helps us make determinations in the scholarship-awarding process, based upon applicant needs, financial thresholds and available organizational funding. Available for residents of Caroline County only.*

<b>INTERNAL USE ONLY:</b>	
Scholarship Approved or Denied _____	By _____ Date _____
For: _____ Classes or _____	Amount   Discount rate: _____
Valid Through _____	Signature _____