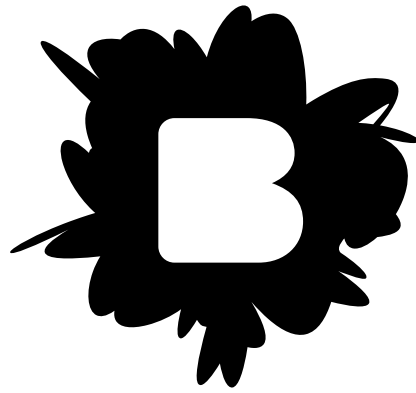


# Scholarship Application Form



## **Gallery/Studio Program Fall 2009**

*Application deadline September 8*

We are pleased to be able to offer a limited number of scholarships for students ages 6 to 13 to attend the Gallery/Studio Program. As the Brooklyn Museum's goal is to provide scholarships to as many applicants as possible, new students will be given preference.

### **Drop-Off Hours for Scholarship Applications**

September 1–8

Wednesday–Friday, 10 a.m.–5 p.m.

Saturday and Sunday, 11 a.m.–6 p.m.

The Museum is closed Mondays and Tuesdays.

Applications may be dropped off at the Visitor Center or in the Education Division Gallery. Be sure to pick up a receipt for your scholarship application. To find out if you have been awarded a scholarship, you must call the Education Division at (718) 501-6230 on **Friday, September 11, 2009**.

**NEW: If the Education Division does not receive confirmation that you accept the scholarship, directly or by voicemail, within 7 days of the call-in date, your scholarship will be rescinded.** The Museum will not notify recipients; the responsibility to call lies with the applicant.

### **Application Requirements:**

In order to be considered for a scholarship, applicants must submit this completed form along with the items listed below. Incomplete applications will not be considered.

#### **1. Statement of Interest**

Describe why you would like to be a student in the Gallery/Studio Program and why you should receive a scholarship. Our expectations are age-appropriate, and we ask students to write their own letters. Typed letters are accepted but not encouraged. Attach the statement to this application.

#### **2. Letter of Recommendation**

This should be a current letter describing the specific art-related and distinguishing merits of the applicant. It cannot be written by a member of the Museum's staff or the applicant's family. This letter may or may not be returned. Attach the letter to this application and indicate, on the letter, the writer's relation to the applicant and contact information.

#### **3. Portfolio**

Although scholarships are not awarded based solely on artistic merit, the portfolio should represent the interest, effort, and creativity of the applicant. The portfolio is a package (folder, binder, or envelope) of eight to ten original and diverse works of art on paper. No three-dimensional work, such as sculptures or framed pieces, allowed. If you are unable to compile works of art that demonstrate the student's commitment, please include a letter explaining how the student will benefit from taking the art class. Label the portfolio with the applicant's name and age. **All portfolios, regardless of result, must be picked up between September 11 and 17, or they will be discarded.**

#### 4. Letter of Need

Include a letter from a parent, teacher, or counselor describing any circumstances that make financial assistance necessary. Attach the letter to this application and indicate the writer's relation to the applicant.

#### 5. Scholarship Applicant Information

Student's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

School: \_\_\_\_\_

Have you received a scholarship before?       Yes       No      If so, when? \_\_\_\_\_

Have you applied for a scholarship before?       Yes       No      If so, when? \_\_\_\_\_

Parent/guardian's name (please print): \_\_\_\_\_

Home phone: \_\_\_\_\_ Secondary phone: \_\_\_\_\_

Phone (emergency): \_\_\_\_\_ E-mail: \_\_\_\_\_

Address (if different from student): \_\_\_\_\_

#### Requested Course:

You will automatically be registered if you receive a scholarship and accept. Confirmation of registration and a Gallery/Studio Student I.D. Card will be sent by mail.

Please review the courses listed in the brochure and on our Web site [www.brooklynmuseum.org/education/gallery-studio/gallery-studio.php](http://www.brooklynmuseum.org/education/gallery-studio/gallery-studio.php) and enter your preference below:

Course title: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_

Alternate: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_

#### 6. Processing Fee (\$15 required, non-refundable fee)

Check enclosed, payable to Brooklyn Museum      Check number: \_\_\_\_\_

Money order      Money order number: \_\_\_\_\_

Visa       American Express       MasterCard       Discover Card

Credit card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

#### 7. Parent/Guardian

I support this application for a Gallery/Studio Program scholarship.

Parent/guardian signature: \_\_\_\_\_

Unsigned applications will not be considered.

Please check that you have completed and enclosed all items (1-7) or attached them to the portfolio.

### Brooklyn Museum

200 Eastern Parkway, Brooklyn, NY 11238-6052

T(718) 501-6230 F(718) 501-6129

[www.brooklynmuseum.org](http://www.brooklynmuseum.org)