

Arts Fund For Region One
The Susan Fillman Memorial Scholarship for the Arts
Scholarship Application
Applications must be postmarked by: May 2, 2008

Name: First	Middle	Last		
Address: Street	Apt.	City	State	Zip Code
Telephone Number:		Email Address:		
Father's Name:		Occupation:		
Mother's Name:		Occupation:		
Name of school you are currently attending:		Grade:	Age:	
Name of Program for which you are seeking financial assistance:				
Address of the program:		Contact Person's Name		
Dates of the program:		Email Address for the program or contact person:		
Full Cost of the program:		Scholarship Amount Requested:		
Please indicate the amount of money your parents/guardians and you will contribute to the cost of the program:				
Have you received any other forms of financial assistance for this program? If yes, please indicate the organization and amount received:				
Have you applied to any other organizations for financial assistance? If yes, please list the organizations:				
Applicant's Signature:		Date:		
Parent/Guardian's Signature:		Date:		

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Student Statement

Please use this sheet to describe any meaningful previous arts related activities. Please also tell us about your hopes for this experience including why this program is meaningful to you. The Arts Fund requires this statement to be written by the student applicant.

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Large empty rectangular box for the main body of the recommendation letter.

Name of person making recommendation:

Date:

Title:

Daytime telephone:

Relationship to applicant:

How long have you known the applicant?

*Letters of recommendation may be enclosed with the student application or mailed directly to:

Linda Peppe
Arts Fund for Region One Scholarship Chair
North Canaan Elementary School
90 Pease Street
Canaan, CT 06018