

the CLAYSTUDIO of MISSOULA Scholarship Application 1106 Hawthorne Street, Missoula, MT 59802

Full Name		
Student's Name (If Applicab	le)	
City	State	Zip Code
Phone	Email	
Class Name		
I am applying for a:		
Partial Scholarship (H	alf of Cost)	Full Scholarship (Entire Cost)
We are only able to provid	e a small number of	scholarship opportunities each year. The full
scholarship option is more	competitive than th	e Partial Scholarship. If you are able to afford the
class with a partial scholars	ship, please do not o	pt for a full scholarship.
Lunderstand that by comp	leting and submitting	g this form, I am applying for enrollment in the
	_	responsible for my or my child's attendance,
		scholarship funding if my application is
approved . Absence, or rep	peated absence in th	ne case of multi session-classes will result in
ineligibility for further assis	tance. Please sign b	elow:
V		
Λ		
		Date

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In the space provided below, please briefly explain your financial situation, and tell us why you, your child, or a youth you are sponsoring, are interested in taking a class at the Clay Studio of	
Missoula.	

Please email completed form to **fire@theclaystudioofmissoula.org**, or mail to/drop off at the Clay Studio of Missoula.