Grant Application for Tuition



All information on this form will be kept strictly confidential.

School/Group Name	Phone
Address	
Contact Person	Email
What dates will your group attend Headlands Institute	.?
Has your group received a tuition grant in past years?	(Circle one.) YES NO
How many students are expected to attend?Of this number, how many need scholarship assistanc	e?
On a separate sheet, please describe: 1. How your classroom objectives will be met by par 2. Your group's need for scholarship support 3. On what basis students will be chosen to attend	rticipating in the program
Please describe the cultural diversity of your school. % African American% Native America% Hispanic/Latino% Caucasian What percentage of students qualify for Free and Rede For private schools, enter an equivalent percentage (e% Free/Reduced Lunches	% Other%biracial uced Lunch at your school?
Please detail your fundraising plan and indicate the am Total tuition expense of the trip Other expenses (i.e. transportation) TOTAL COST	sount of scholarship requested. \$ \$ \$
Family/student contributions Student fundraising activities Outside funding sources (i.e. federal, state, grants) School funds Requested funds from Headlands Institute	\$ \$ \$ \$
	st provide data to Headlands Institute so that we can report litional information about your trip (pictures, journals, assign
I verify the above information is true and correct.	
Signature	Date

Please mail or fax completed form by Sept 24, 2010 for prioritized funding, or send this at least 30 days prior to your program to:

Scholarship Committee, Headlands Institute, 1033 Fort Cronkhite, Sausalito, CA 94965

Fax: (415)332-5784