

Yosemite Institute Application for Tuition Grant

All information on this form will be kept strictly confidential.

School/Group Name	Phone
Address	Email
Dates of your Yosemite Institute Program	Your Name
Has your group received a scholarship award in past y	rears?
How many students are expected to attend?	
Of this number, how many need scholarship assistance	re?
On a separate sheet, please describe: 1. How your classroom objectives will be met by parti 2. Your group's need for scholarship support 3. On what basis students will be chosen to attend Please describe the cultural diversity of your school.	
% Hispanic/Latino % Caucas	ian % Other
What percent of students qualify for the free/reduced (private schools, enter an equivalent percentage e.g., for	
Please detail your fundraising plan and indicate the arr Cost: Total Student Tuition Expense of the Trip \$ Please note that scholarship assistance is not available Transportation Expense \$	
Funding: Family/Student Contributions Student Fundraising Activities Outside Funding Souces School Fund Funds Requested from Yosemite Institute	\$ \$ \$ \$
I verify the above information is true and correct:	
Your Name	

Per our new scholarship policy, recipient teachers **must** provide data to Yosemite Institute so that we can report back to our funders. We also appreciate receiving additional information about your trip (pictures, journals, assignments, curriculum used in the classroom).

Applications must be received at least 90 days prior to your program to be considered.

Please email completed form to: yischolarships@yni.org (preferred)

You may also fax the application to 209-379-9510 attn: Scholarship Committee or mail to: Attn: Scholarship Committee, Yosemite Institute, PO Box 487, Yosemite, CA 95389