

Science Factory Visiting Group Scholarship Program

Request for Financial Assistance

In order to help us determine eligibility for our scholarship program, please provide us with the following information.

Applicant Organization: _____

Address: _____

Type: 501c(3) nonprofit public school other

Your organization serves:

Individuals or group(s) to receive Science Factory scholarship:

Total number of persons in group: _____

Percentage/number of economically disadvantaged (e.g. Federal Lunch Program):

_____ Percent of group _____ # of students eligible

Program for which you are seeking a scholarship:

Exhibit Hall Planetarium Show Both

Please list available dates below:

Please review our current eligibility guidelines and attach documentation of eligibility (Title I, federal free and reduced price lunch determination letter, or 501(c)3 determination letter).

Contact Person: _____ **Principal/Director:** _____

Title: _____ **Signature of Principal/Director:**

Phone Number: _____ _____

E-mail: _____ **Date:** _____