

Kravis Summer Arts Institute

Scholarship Form

Student Name _____

Grade Entering Fall 2010 _____

Student's School _____

Parent(s) Name(s) _____

Parent(s) Telephone Number(s) and email
address: _____

Parent(s) Street Address with zip code: _____

My child is currently on the Free or Reduced Lunch Program _____

Please explain why you will need scholarship assistance. The camp requires that you pay a portion of the full cost of \$100 for the two weeks. How much can you pay?

Reminder: You must attach your “Registration Form” to the Scholarship Form

This form is to be returned to Fulton Teaching and Learning Center, 8906 East 34th Street, Tulsa Oklahoma 74145.