



Need Help Attending ATAS Workshops?

We offer financial assistance to individuals and families who are not able to pay full fees for the At The Art Studio (ATAS) programs.

To apply for financial assistance, please submit the following information to ATAS.

1. Completed financial assistance application.
2. Include one of the following as proof of your income:
 - A copy of your most recent Federal Income Tax return. If you do not file federal income taxes, please call 1-800-TAX-FORM (1-800-829-1040) for a verification of non-filing or go to IRS.gov for other information.
 - A Social Security Proof of Income Letter. You can print this statement online at socialsecurity.gov/myaccount.
 - Two recent paycheck stubs
 - A letter from your employer verifying your employment and stating your annual salary.
 - A Wage and Tax Statement for Self Employed (1099)
 - If you are unemployed, draw social security or a full-time student, please provide a summary of your unemployment benefits, SSI paperwork, or financial aid benefits and student schedule.

NOTE: Please mark out all social security numbers, tax ID numbers and/ or credit card numbers before submitting any paperwork.

Applications must be submitted with all required documentation. Incomplete applications cannot be processed. All financial assistance is distributed on a case-by-case, first-come, first-served basis.

Submissions accepted via email, mail or drop off.

See address on the left. You will receive an email within two weeks regarding your qualification and next steps.

At the Art Studio
Art Department
202A Tyler Hall
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Oswego, NY 13126

(315) 312-4836
atas@oswego.edu
www.attheartstudio.org

*We look forward to helping young artists
attend our program.*

Cynthia Clabough, Director
Seeley Cardone, Coordinator

Income Eligibility Guidelines:

Full Scholarship

Household size:	Annual Income Below:
2 – 4 Individuals	\$32,700
5 Individuals	\$40,500
6 Individuals	\$45,500
7 or more Individuals	\$50,000

Partial Scholarship:

Household size:	Annual Income Below:
2 – 4 Individuals	\$46,800
5 Individuals	\$58,000
6 Individuals	\$65,100
7 or more Individuals	\$71,500

Approval and Scholarship Award Process:

- Awards may vary from session to session, based on financial need and availability of funds
- Scholarships are awarded in various amounts and may not cover the entire workshop fee
- Applicants may be required to contribute a minimum of \$10 to help offset cost of materials.
- Incomplete scholarship forms will not be reviewed
- All application information will be kept confidential
- An ATAS staff member will contact you upon review of your application

Applicants are highly encouraged to apply for scholarships early in order to be considered. The application is **due** one week prior to the start of a workshop. Scholarships may not be considered if received later than one week before a workshop start date.

APPLICATION: Please attach proof of income. See cover letter for approved forms.

Annual family income (Adjusted gross income for most recent years) \$_____

Number of children under 18 living in the home: _____

Number of adults living in the home: _____

Has applicant previously received a scholarship for ATAS workshops?

No___ Yes___ If yes, list year/session of last scholarship: _____

Is the student in a free or reduced lunch program at school?

No___ Reduced___ Free___

Please explain any other special circumstances that bear on your need for scholarship assistance:

Requesting Scholarship for which session (pick one unless applying for summer):

___Fall ___Winter ___Spring ___Summer Session 1 ___Summer Session 2

Requesting Scholarship for Before and After Care: Please note funds for before and after care are limited and cannot be guaranteed. Before and after care is only offered for sessions that happen on weekdays.

___ Before Care ___ After Care ___ Number of days requesting

APPLICANT INFORMATION:

Please type or print neatly in ink. Use additional sheets if necessary. Please include information on all family members being considered for a scholarship

Number of Students Requesting a Scholarship _____

Last Name _____ First Name _____

Child age _____ Grade _____ Name of school _____

Last Name _____ First Name _____

Child age _____ Grade _____ Name of school _____

Last Name _____ First Name _____

Child age _____ Grade _____ Name of school _____

Parent/Guardian #1 Information

Name _____

Street Address _____ City/Zip Code _____

Phone _____ Email Addresss _____

Parent/Guardian #2 Information

Name _____

Street Address _____ City/Zip Code _____

Phone _____ Email Addresss _____

1. I, undersigned, certify that the information contained in this application is true and correct to the best of my knowledge. I acknowledge and understand that the information provided here will be relied upon for purposes of determining my eligibility to receive a scholarship from At the Art Studio and that any misstatement, fraudulently or negligently made in this or in any other statement made by me may result in the denial of my eligibility to receive a scholarship. Scholarships are awarded for specific sessions and may not be transferred or deferred.

Parent/Guardian signature
SIGNATURE: _____ DATE: _____