



Individual Scholarship Application Form

The ACA awards scholarships based on financial need. An approved scholarship awards 75 percent of the class fee. Scholarships are awarded as funds are available.

To apply:

- Fill out the Individual Scholarship Application Form below. (Please Type or Print)
- Submit a letter sharing how this scholarship would be a benefit.

Applicant Name: _____

Address (street, city, state, zip): _____

Email address: _____

Phone: _____

Age: _____

If minor Parent, please complete:

Name of parent or guardian: _____

Parent/Guardian Address (street, City, State, Zip): _____

Parent's Phone number: _____

Parent's Email: _____

List the specific class you are interested in taking: _____

How did you hear of the ACA Scholarship Program? _____

Email application and documentation to: val.herrACAexecutivedirector@gmail.com

Subject: scholarship application

***Mail application and documentation to: ACA Scholarship Application, Adrian Center for the Arts
PO Box 951 Adrian, MI 49221***

