

# ART STUDENTS LEAGUE OF DENVER

## 2021 Scholarships for Youth Ages 6 – 17 Guidelines and Application

The Art Students League of Denver (ASLD) awards scholarships, when available, to attend our Youth programs including: Fall session, Winter/Spring session, and Summer KidART Camps and TEEN Studio Workshops - for youths ages 6 through 17. Children aged 5 years may also qualify if they have completed kindergarten. The intent of the scholarship program is to provide equal access to education in the visual arts to youth who have a strong desire to learn, but lack the financial means to afford our classes. Please refer to our ASLD Summer KidArt Camps and TEEN Studio Workshops brochures or ASLD website ([www.asld.org](http://www.asld.org)) for details on offerings or contact us directly at 303.778.6990 or [info@asld.org](mailto:info@asld.org).

### **SCHOLARSHIP INFORMATION**

Recipients will receive either a full or partial scholarship based on eligibility. Scholarships are reviewed and granted on a first-come, first-serve basis until all available funds are used. Scholarships **do not include** snacks, lunch, or transportation to and from ASLD. Camp registrations are limited to space available in requested programs. Recipients and their instructors may be asked to complete an evaluation after completion of the scholarship. Once a recipient qualifies for scholarship funding, their **qualification is valid for one year/3 sessions** (semesters) from the time they applied. Students are welcome to re-apply the following year and must do so for ASLD to determine their eligibility for the next year/3 sessions. **Students that do not show-up &/or cancel their registration by at least 1 week prior to the course start date may have their scholarship benefit suspended for up to 1 year.**

- **Full Scholarship:** A co-pay of \$10 per course &/or camp is required at time of registration. The scholarship also covers a youth membership to ASLD for one year, material fees, and art supplies.
  - \*For camps: this fee covers tuition for up to (4) half-day, one-week long camps. \*A Two-week long clay camp may substitute for (2) half-day camps.
  - \*For “*Friday Night Teen Studio*” only one \$10 co-pay is charged per session/semester. Student must be registered for each month they wish to attend.
- **Partial Scholarship:** Recipients receive 50% off of the cost of a course. Partial scholarship also covers a youth membership for ASLD valid for one year.
  - \*For camps: recipients receive 50% off of tuition for (4) half-day, one-week long camps. \*A Two-week long clay camp may substitute for (2) half-day camps. Partial scholarship **does not include** material fees. Payment is required at the time of registration.
  - \*For “*Friday Night Teen Studio*” the scholarship recipient may attend any/all “*Friday Night Teen Studio*” per session/semester at 50% off each month. Student must be registered for each month they wish to attend.

**NOTE:** Due to the pandemic and continued capacity limits ASLD is not able to offer supervised care during the 2021 camp season.

Eligibility requirements:

Scholarships are based on financial need (please refer to the tables on page 2). We accept applications from multiple youths within the same household. Applications are valid for one year or 3 sessions/semesters (whichever comes first). Applicants are welcome to re-apply for consecutive years and/or if household income status changes. **In order for your application to be complete, proof of income (recent income taxes or paystubs) must be submitted with the application and registration forms.** Incomplete applications will not be reviewed. ASLD reserves the right to award scholarships at its own discretion. There is no cash value for scholarships, and we do not offer credits or transfers.

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Household Income Limits			
Full Scholarship		Partial Scholarship	
Number in household	Gross Monthly Income	Number in household	Gross Monthly Income
2	\$3,667	2	\$5,333
3	\$4,125	3	\$6,000
4	\$4,583	4	\$6,667
5	\$4,950	5	\$7,200
6	\$5,317	6	\$7,733
7	\$5,683	7	\$8,267
8	\$6,050	8	\$8,800
Each additional person	Add for each: \$450	Each additional person	Add for each: \$600

### Big HeART Scholarship Program for Youth (Ages 6 - 17)

Application Month/Year: \_\_\_\_\_

CHILD(REN)'S NAME(S), each child in the same household can be added:

\_\_\_\_\_

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PARENT/GUARDIAN NAME:

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ADDRESS:

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CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_

COUNTY:

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PHONE: \_\_\_\_\_

EMAIL:

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What is your gross monthly household income (before taxes are taken out)?

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How many family members are part of your household? \_\_\_\_\_

Do you qualify for any government programs (food stamps, free lunch, TANF, Medicaid, SNAP, etc.)?

[Yes] [No]

If yes, please indicate which programs and how much subsidies you receive:

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In order to receive grant awards from many of the foundations which fund our scholarship program, it is required that we track the ethnicity of our scholarship students. Please check all that apply. Thank you for indicating your ethnicity or cultural background:

Caucasian  African American  Asian  Hispanic/Latino  Native American

Prefer not to answer  Other  Please specify:

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Why do you/your child(ren) want to participate in classes and/or summer camps at the Art Students League of Denver?

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**Camp Registration Information – This information must be complete for your application to be accepted. Please include an additional sheet if you’re applying for more than 2 children in the same household.**

**ALTERNATE PARENT/GUARDIAN CONTACT’S NAME:**

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**ALTERNATE CONTACT’S CELL/ BEST NUMBER:**

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**ALTERNATE CONTACT’S RELATIONSHIP TO CHILD(REN):**

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**PHYSICIAN NAME:** \_\_\_\_\_ **PHYSICIAN PHONE:**

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**PHYSICIAN’S HOSPITAL/OFFICE NAME:**

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**Child 1 NAME:**

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**Child 1 AGE:** \_\_\_\_\_ **BIRTH (MONTH):** \_\_\_\_\_ **(YEAR):**

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**Child 2 NAME:**

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**Child 2 AGE:** \_\_\_\_\_ **BIRTH (MONTH):** \_\_\_\_\_ **(YEAR):**

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After reviewing the ASLD website ([www.asld.org](http://www.asld.org)) please list the week, title, and instructor of your top 5 preferred camps. \*Remember: you may include an additional sheet if you’re applying for more than 2 children.

Child 1 - 1<sup>st</sup>  
Choice: \_\_\_\_\_

Choice: 2<sup>nd</sup>  
Choice: \_\_\_\_\_

Choice: 3<sup>rd</sup>  
Choice: \_\_\_\_\_

Choice: 4<sup>th</sup>  
Choice: \_\_\_\_\_

Choice: 5<sup>th</sup>  
Choice: \_\_\_\_\_

Child 2 - 1<sup>st</sup>  
Choice: \_\_\_\_\_

Choice: 2<sup>nd</sup>  
Choice: \_\_\_\_\_

Choice: 3<sup>rd</sup>  
Choice: \_\_\_\_\_

Choice: 4<sup>th</sup>  
Choice: \_\_\_\_\_

Choice: 5<sup>th</sup>  
Choice: \_\_\_\_\_

Do you have access concerns or do you require special accommodations in order to participate? The Art Students League will do everything possible to accommodate your child(ren)'s needs. [ ] yes [ ] no  
If yes, please explain:

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Applications may be submitted via email to [info@asld.org](mailto:info@asld.org), via post, or in person to the Registration Office. **Proof of income *must* be submitted with your scholarship application. ASLD will not accept incomplete applications.** Scholarship applications are reviewed on a first-come, first-serve basis. Please allow 1 – 2 weeks for a reply. Feel free to contact ASLD with any questions at 303.778.6990, or via email at [info@asld.org](mailto:info@asld.org) and a registration staff member will be happy to assist.

By post submit application to:  
Art Students League of Denver  
Attn: BigHeART Scholarship Applications  
200 Grant Street  
Denver, CO 80203

Thank you for inquiring about the scholarship program at the Art Students League of Denver.  
By signing this application you acknowledge all the information provided is accurate and you understand the  
Scholarship Policies stated above.

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Parent/Guardian Signature

Date