



Dear Parent or Guardian,

Thank you for your interest in the Family Museum's Access Assistance program! Through this program, the Family Museum is able to award a limited number of scholarships to eligible families to support Museum membership or enrollment in our dance classes. Access Assistance is generously supported by the Family Museum Foundation.

To apply, please fill out the attached application form and return with the required documentation. Applications are typically processed within two weeks. You will be notified by mail of your award status.

Access Assistance awards are based up on the Federal Government's Free and Reduced School Meals program guidelines. Families that are eligible for reduced price school meals may be awarded up to 50% of a program fee; families that qualify for free meals can receive up to 90% support. To view the eligibility guidelines for the current year, please visit the USDA School Meals program webpage at <http://www.fns.usda.gov/cnd/Governance/notices/iegs/IEGs.htm>. Your child does not have to be enrolled in public school to qualify for assistance; we simply use these guidelines as a determination of need.

Questions regarding your application may be directed to me at any time. I can be reached by telephone at 563-344-4166 or by e-mail at rdemaris@bettendorf.org.

Best wishes,

Rachel DeMaris
Manager of Public Programs



If you are a full time or part time student, please submit proof of student status.



D. Program Participants

Name of Parent(s)/Guardian(s):

Name of Child(ren):

A. _____
 B. _____
 C. _____

Address: _____

Phone (Day) _____ (Evening) _____

Please list other dependent children under the age of 18 or other family members living in your household:

E. Service requested - Please check all that apply:

- Family Museum Membership (only the Family Membership level is supported) Fee: \$85
- Dance Class _____ Fee: _____
- Dance Class _____ Fee: _____
- Dance Class _____ Fee: _____

F. Payment Schedule

Portion parent/guardian able to pay \$ _____

Parent/Guardian must pay the remaining fee for classes and/or memberships in a timely manner.

Total assistance requested: \$ _____

G. Parent/Guardian support

- Yes No I agree to pay my part of the class fees upon notification of assistance approval.
- Yes No I understand that my membership will not become active until my portion of the payment is received.
- Yes No If granted tuition support, are you committed to seeing that your student is in regular attendance in class?
- Yes No Do you understand that if a student accepting tuition assistance does not attend classes regularly, you may not be considered for assistance in the future?

H. Parent/Guardian Signature:

I. _____ II. _____ Date: _____

OFFICE USE:

Application received: _____ Amount awarded: _____ Notification letter sent: _____ Enrollment date: _____
 Processed by: _____

Updated 12/2009