

Allegany Arts Council  
**Hadra Scholarship Fund**  
**Grant Application Form**

PLEASE TYPE OR PRINT ALL INFORMATION

**A. Contact Information:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

**B. Proposed Use for Grant Funds:** [ ] supplies [ ] training [ ] travel [ ] other

Describe the use of the funds. Include **overall cost** of project/activity, and full name, location, phone number and website of any teacher, workshop, class or institution, and if training or travel is involved.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Budget/Amount of Grant Request:**

Provide a line item breakdown of expenses. **List only items for which you are requesting funding.** (For example: acrylic paint, 2 tubes @ \$10 each = \$20, or 3 violin lessons @ \$20 each = \$60).

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL GRANT REQUEST (may not exceed \$100) \$ \_\_\_\_\_**

**D. Signature:**

I certify that the information provided in this application is accurate and true.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Signature of Representative, if Applicant is under 18 or a Client*

\_\_\_\_\_  
*Representative Phone Number*