

**For Office Use Only:**

Date Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ Date Applicant Contacted: \_\_\_\_\_

Approved: \_\_\_\_\_ Amount: \_\_\_\_\_ Not Approved: \_\_\_\_\_ Incomplete: \_\_\_\_\_



**Cedarhurst's Art Wheels Program: 2021-22 Application**

Sponsored by Durham School Services

**General Information:**

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

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

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

County: \_\_\_\_\_ Federal Tax ID Number: \_\_\_\_\_

Principal's Name: \_\_\_\_\_ Distance of School from Cedarhurst: \_\_\_\_\_

Did your school participate in Cedarhurst programming last year?  Yes  No

How many field trips do you plan on making to Cedarhurst this year? \_\_\_\_\_

**Field Trip Information:**

Date of field trip for which funding is being requested: \_\_\_\_\_

Has this field trip been booked with Cedarhurst?  Yes  No

Contact Person (with title) for Field Trip: \_\_\_\_\_

Contact Person's E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

In what type of educational programming will your group be participating? (check all that apply)

- School Performing Arts program  
Time of Performance: \_\_\_\_\_ Title of Production: \_\_\_\_\_
- Tour (what type? \_\_\_\_\_)
- On-site art activity
- Fifth Grade Fun Day
- Other, please describe: \_\_\_\_\_

Number of students who will be visiting: \_\_\_\_\_ Number of adults? \_\_\_\_\_

Age or grade of students participating: \_\_\_\_\_ Number of buses required: \_\_\_\_\_

Grant funds requested (based on number of buses and mileage): \_\_\_\_\_

Name of Bus Provider: \_\_\_\_\_ Phone: \_\_\_\_\_

**Narrative:**

How will you relate this field trip experience to your classroom curriculum?

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In what ways do you expect your students benefit from this educational program at Cedarhurst?

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**Signature and Certification:**

I hereby certify that all information provided in this application is true, correct, and complete. I agree that any false or misleading information or material omission may disqualify my school from consideration for an Art Wheels grant. I acknowledge that I have read all grant guidelines and agree to abide by them if my application is awarded. I understand this application does not guarantee funding for my school, and if my school cancels a field trip after funding has been awarded for any reason other than an act of God, it will rule my school ineligible for Art Wheels funding the following year.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name/Title: \_\_\_\_\_

