

# CITYARTS

334 North Mead | Wichita, KS 67202 | 316.462.2787 | FAX – 316.337.9087  
[www.wichitaarts.com](http://www.wichitaarts.com)

## CITYARTS ADULT SCHOLARSHIP FORM

Adult Scholarships are available through the **Arts Council**. Registration payment for one enrollment may be awarded per each calendar year.

**Please complete this form:**

<b>Student's Name:</b> _____
Circle one: <b>(Male or Female)</b>
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ (h) _____ ©
Email: _____
<b>Requested Program:</b> (by priority)
1. _____ Start Date: ____/____/____ Cost: \$ _____
2. _____ Start Date: ____/____/____ Cost: \$ _____
3. _____ Start Date: ____/____/____ Cost: \$ _____
<b>Explain why you are requesting this scholarship.</b>
_____
_____
_____
_____
_____
_____

**Mail Scholarship form to:** (or) **Fax Scholarship form to:**  
Attn: David Murano Attn: David Murano  
334 N. Mead (316) 858-9087  
Wichita, KS 67202

Due to processing time, scholarship must be requested 3 weeks prior to start date. Upon approval of adult scholarship, the student will be notified by phone. Once student is enrolled, a receipt/confirmation will be mailed by the Front Desk Coordinator. Please understand spaces fill quickly because we have a first come first served service. For further questions, please contact David Murano, CityArts Assistant Director, [dmurano@wichita.gov](mailto:dmurano@wichita.gov) or by phone (316) 462-2787 x792.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR STAFF ONLY:**

RECEIVED	APPROVED/ REJECTED	CK REQUEST	CK RECEIVED	ENROLLED	NOTIFIED
_____	_____	_____	_____	_____	_____
<i>date</i>	<i>date</i>	<i>date</i>	<i>date</i>	<i>date</i>	<i>date</i>
_____	_____	_____	_____	_____	_____
<i>initials</i>	<i>initials</i>	<i>initials</i>	<i>initials</i>	<i>initials</i>	<i>initials</i>