

**Field Trip/Outreach Scholarship Application**

**2017-2018 Season**

 **Scholarship will cover all fees for 35 students participating in:**

* **1 Program at the Sacramento History Museum**

 **OR**

* **1 Outreach Presentation at you school site.**

**School/Organization:**

**School Address:**

**City: State: Zip:**

**Contact Person:**

**Phone: Email:**

**Please check all that apply to school/organization:** [ ]  **Low Income** [ ]  **Title 1**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of Students** | **Grade Level** | **Number of Teachers** | **Number of Chaperones** |
|   |   |   |   |

 **Applicants MUST send in this form with the Field Trip Request Form to be considered for the scholarship.**

**Please allow two weeks for response. Forms may be submitted via fax, email or mail.**

 **Signature:**   **Date:**



**Field Trip/Outreach Request Form**

|  |  |
| --- | --- |
| Last Name   | First Name  |
| School/Group Name Grade Level/ Age Group  |
| School Address  |
| Contact Phone  | Contact Email  |
| **Teacher Names(s):** please include Miss, Ms., Mrs., Mr.  |

**I am interested in:** [ ] Visiting the Sacramento History Museum (You come to us!)[ ] Outreach Programs (We come to you!)

**Have you visited us before?** [ ] Yes[ ] No

**If no, how did you hear about our field trip opportunities?**

[ ] Word of Mouth[ ] Public Programs Brochure [ ] Internet [ ] Personal Visit to the Museum

If Internet, please specify where:

  Click here to enter text.

**What Programs Would You Like To Schedule?**

**Indoor Museum Programs (1 hour each)**

 [ ]  Gold Rush w/ Gold Panning **(1.5 hrs.)** [ ]  Museum Scavenger Hunt [ ]  Nisenan

[ ]  Head West [ ]  Guided Museum Tour [ ]  May Woolsey

[ ]  Historic Print Shop **(30 minutes)** [ ]  California’s Agriculture [ ]  Anchors Away

 **Outdoor Museum Programs (1 hour each)**

[ ]  Underground Tour [ ]  The Gold Fever! Tour

[ ]  Old Sacramento Scavenger Hunt  [ ]  Gold Panning **(30 minutes)**

**How many of each of the following will be attending?**

|  |  |  |
| --- | --- | --- |
| Students | Teachers | Chaperones |
|   |   |   |

 **Preferred Dates & Times For Program(s)**

|  |  |  |
| --- | --- | --- |
| ***1st Preference*** | ***2nd Preference*** | ***3rd Preference*** |
| Date  | Date  | Date  |
| Time  | Time  | Time  |

**Notes or Comments?**

Please note that this is not a program confirmation. This request form does not guarantee you the program, date or time requested above. Please allow one business week to receive a response to request. Request forms can be submitted via email, fax or by mail.

*Educational and Interpretive Programs*

*Sacramento History Museum*

*101 I Street*

*Sacramento, CA 95814*

*Fax (916) 264-5100*