

**Field Trip/Outreach Scholarship Application**

**2019-2020 School Year**

**Scholarship will cover all fees up to $250 for:**

* **Program at the Sacramento History Museum**

 **OR**

* **Outreach Presentation at your 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:**



**Scholarship Request Form**

|  |  |
| --- | --- |
| Teacher’s Last Name   | Teacher’s First Name  |
| Teacher’s Contact Phone  | Teacher’s Contact Email  |
| School/Group Name Grade Level/ Age Group  |
| School Address  |
| **Teacher Name(s) for All Teacher(s) Attending for Gold Rush or Print Shop Program:** 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 [ ] Personal Visit to the Museum [ ] Internet

If Internet, please specify where:

  \_

**What Museum Program(s) 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)**

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

|  |  |  |
| --- | --- | --- |
| Students (Minimum 10 Students) | Teachers | Chaperones |
|   |   |   |

How many students will be attending? (minimum requirement of 10 students)

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

Programs available from 10AM-3:30PM

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

 **Outreach Programs (1 hour each)**

 [ ]  Gold Rush [ ]  Nisenan [ ]  Head West

 [ ]  May Woolsey [ ]  California’s Agriculture [ ]  Anchors Away

|  |  |
| --- | --- |
| How many classes? | Teachers |
| Click here to enter text. |   |

For Outreach include the times for each presentation. Please consider bell and break schedule.

|  |  |
| --- | --- |
|  | **Times (all outreach programs are 1 hour long)** |
| **Presentation 1** |  |
| **Presentation 2** |  |
| **Presentation 3** |  |
| **Presentation 4** |  |

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

Please note that this is not a confirmation. This request form does not guarantee you the program, date or time requested above. Program is confirmed once you receive an invoice. A $50 deposit is required 2 weeks after you receive the invoice.

**CANCELATION POLICY**- We require a 1-week notice to cancel or reschedule programming. We will not issue a refund for cancelation less than 1 week from the original field trip date. If cancelation occurs less than 1 week before to a scheduled program, you must talk to someone from the education department to confirm your cancelation. **No Shows, No Calls will be charged the full balance in addition to the $50 late fee**.

**Please return form to:**

**Zoey Jennings**

**(916) 808-6896**

**zjennings@cityofsacramento.org**

Fax (916) 808-5100