Shape

Description automatically generated with low confidence

**Field Trip Scholarship Application**

**2023-2024 School Year**

**Scholarship will cover all fees for one class and one program at the**

**Sacramento History Museum.**

**School/Organization:** Click here to enter text.

**School Address:** Click here to enter text.

**City:** Click here to enter text. **State:** Click here to enter text.**Zip:** Click here to enter text.

**Contact Person:** Click here to enter text.

**Phone:** Click here to enter text. **Email:** Click here to enter text.

**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:** Click here to enter text. **Date:**

Shape

Description automatically generated with low confidence

**Virtual and Outreach Trip Request Form**

|  |  |
| --- | --- |
| Teacher’s / Organizer’s First Name | Teacher’s / Organizer’s Last Name |
| Teacher’s / Organizer’s Contact Phone | Teacher’s/ Organizer’s Contact Email |
| School/Group Name Grade Level | |
| School Address | |
| **Teacher Name(s) for All Teacher(s) Attending for Gold Rush or Print Shop Program ONLY:** please include Miss, Ms., Mrs., Mr, Mx, etc | |

**What Program(s) Would You Like To Schedule?**

**1-Hour Virtual Museum Programs (Limit of 35 screens/students per class)**

Gold Rush  Nisenan Heading West History Mystery

Underground Tour  Cemetery Tour

**1-Hour Outreach Program (Limit of 35 students per class) \* Contact us if looking for different program \***

Nisenan  History Mystery Heading West

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

|  |  |  |
| --- | --- | --- |
| Students (Minimum 10 Students) | Teachers/ Staff/ Aides | Number of Screens (for virtual only) |
|  |  |  |

**Preferred Dates & Times for Program(s)-** Programs available from 10AM-3:30PM

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

**Notes or Comments?**

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. Payment is required one week before program.

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