Scholarship Application Form
(Formerly Known As) Agassiz Baldwin Community’s Children’s Programming
and Maud Morgan Arts

20 Sacramento Street Cambridge, MA 02138  |  P: 617.349.6287  |  agassiz.org  |  maudmorganarts.org

This form does not constitute enrollment in either an MMA or ABC Children’s Program. To register online for classes, workshops, and programs, visit agassiz.org or maudmorganarts.org. For Maud Morgan Arts programming, use MMA2022 at check out to register without paying. For ABC Children’s Programs, use SCH2022 at check out to register without paying. You will be sent an invoice once your scholarship has been processed.

Student Information
First Name: ___________________________  Last Name: ___________________________

Address: __________________________________________

City: ______________________ Zip Code: _______  Home Phone: _____________

Parent/Guardian Contact Information (if student is a minor)
Name: __________________________________________

Email: ___________________________  Phone: ___________________________

REQUIRED: Household Information (all adults)

Name of Adult: _______________________________________

Employment Status: ☑ Working  ☐ Student  ☐ Other: _____________________________

Name of Adult: _______________________________________

Employment Status: ☐ Working  ☐ Student  ☐ Other: _____________________________

Name of Adult: _______________________________________

Employment Status: ☐ Working  ☐ Student  ☐ Other: _____________________________

Number of Children or Dependents: _______________________

REQUIRED: Scholarship Application Documents

☐ Tax Form 1040   ☐ 2 Paystubs (ABC Children’s Programs ONLY)

Optional Scholarship Application Documents
☐ Letter explaining financial need or hardship
☐ Disability
☐ Government subsidy

Office Use Only:    App received _____     App awarded _____
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Optional Scholarship Application Documents Continued
☐ Child Support
☐ Other sources of income or scholarship

Please submit completed form and application documents to:
ATTN: Registration
20 Sacramento Street
Cambridge, MA 02138

OR email to Registration at registration@agassiz.org

Parent/Caregiver Signature OR Adult Student Signature: ____________________________

Date: __________________________

Effective September 9, 2020

Scholarship Guidelines

Goals
Our organization is committed to providing accessible, high quality programs for both children and adults. We strongly value a diverse community and strive to maintain an environment that reflects economic, racial, and cultural diversity. To help achieve this end, we have funds allocated for scholarships to cover partial and full tuition. Scholarships are intended for families who are not eligible for a state childcare voucher, but still demonstrate a need for childcare. For details on voucher eligibility, please visit the Child Care Choices of Boston website at www.childcarechoicesofboston.org or call 617.542.5437. Fees for Maud Morgan Arts materials are not typically covered by scholarships.

Eligibility Requirements
Recipients of our scholarship awards often receive public assistance (WIC, food stamps, Section 8 housing, free or reduced lunch). We take into account gross monthly income, family size, and personal hardship. Families of 2 who earn an annual income of $70,000 or less are eligible to apply. The annual income cap increases with the size of the household. Due to limited scholarship award funding, families and students must commit to regular attendance. Children are expected to attend at least 80% of their scheduled enrollment. These policies and procedures are set forth to ensure that all applicants receive full and equal consideration. We reserve the right to make decisions on a case-by-case basis. We are committed to providing open communication and encourage you to contact us for support if you have any questions or concerns about your eligibility.

Procedure and Timeline
Scholarship applications are accepted on a rolling basis. Please allow 2-3 weeks for calculation of your award. Late applications will be considered if funding allows.

Contact Registration
Email: registration@agassiz.org
Phone: 617.349.6287 x28

Office Use Only: App received _____ App awarded _______