



The Duvall Foundation for the Arts (DFA) provides scholarship opportunities to children and young adults residing in the Lower Snoqualmie Valley who have shown a strong interest and ability in the arts and, who may, because of financial restrictions, be unable to take advantage of the educational programs otherwise available to them.

Eligibility:

Applicants must be residents of the Lower Snoqualmie Valley and demonstrate economic need for scholarship assistance.

Application Process:

Applicants must complete and submit the scholarship application to the Duvall Foundation for the Arts (DFA) for review by the scholarship committee no less than 1 month prior to the date their program begins.

Thank you for your interest in the DFA and our scholarship program. We appreciate the opportunity to fulfill our mission to “promote creativity, diversity and cultural awareness by supporting the arts and arts education in the Lower Snoqualmie Valley”.

Sincerely,

Duvall Foundation for the Arts Scholarship Committee

DFA MISSION:

THE DUVALL FOUNDATION FOR THE ARTS PROMOTES CREATIVITY, DIVERSITY, AND CULTURAL AWARENESS BY SUPPORTING THE ARTS AND ARTS EDUCATION IN THE LOWER SNOQUALMIE VALLEY.



Scholarship Application

Applicant's Name: _____ Age: _____

Parent/Legal Guardian: _____

Home Address: _____

E-mail Address: _____ Phone: _____

Provider & Location of Program: _____

Program Start Date: _____

Program Cost: _____

Include a brief statement about the art program you would like to attend and why you chose it. _

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**Letter of Support**

To be filled out by Parent or Guardian.

Please give your reason for wanting this student to receive a scholarship award for art studies from the Duvall Foundation for the Arts (DFA)

Please check the appropriate box to indicate family income

- Under \$20,000
- \$20,000 - \$40,000
- \$40,000 - \$60,000
- \$60,000 - \$80,000
- \$80,000 +

I understand that acceptance of a scholarship from the Duvall Foundation for the Arts require the student's attendance for the length of the session. Upon completion, the student will provide the DFA with a summary report of the program they attended and how they benefited from it.

Parent/Legal Guardian's Signature: _____

Date: _____

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Letter of Recommendation for Scholarship

To be filled out by Art Teacher (or other instructor).

Applicant's Name: _____

Teacher's Name: _____

School: _____ Phone: _____

Please give any information about this student that would justify his/her receiving a scholarship from the Duvall Foundation for the Arts (DFA).

Teacher's Signature: _____

Date: _____

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