



Dear Administrator:

Thank you for your inquiry regarding grant assistance for Museum of Flight education programs. The Museum is a non-profit organization dedicated to acquiring, preserving, and exhibiting historically significant air and space artifacts, which provide a foundation for scholarly research and lifetime learning programs that inspire an interest in and understanding of science, technology and the humanities.

**Guidelines for The Museum of Flight grant assistance program:**

To qualify for grant assistance, your school or non-profit youth organization must have a **minimum of 35%** of students on a federal free or reduced lunch program.

**We now offer a tiered grant assistance scale:**

35-50% FRL-**30%** discount on programs

50-65% FRL-**40%** discount on programs

65-80% FRL-**50%** discount on programs

80-100% FRL-**60%** discount on programs

For sleepover programs, the maximum award granted is **50%**.

**Grant assistance is awarded after ALL other discounts are applied.**

**Schools or youth groups must already have reserved an education program prior to applying.** If, by the day before your program, you do not receive a response, please e-mail: [education@museumofflight.org](mailto:education@museumofflight.org).

To reserve an **On-Site Program**, please call **206-764-1384**. To reserve an **Outreach Program**, please call **206-768-7175**.

**Eligible schools/groups must apply for grant assistance at least ONE MONTH prior to the date of their program.** Groups will then receive confirmation within two weeks of submitting the application.

Please apply early as funds are allocated on a first-come, first-served basis as long as funding is available. **If a group cancels within a one week period, the group is liable for a \$50.00 cancellation fee.**

**As a requirement** of the grant assistance program, all recipients must complete an assessment of the program(s) in which they participated. This assessment will help us improve our programs while allowing teachers to give us direct feedback. The assessment form will arrive with your grant confirmation letter. Please complete and return the assessment to The Museum of Flight within one week of the education program.

Please contact me if you have any questions:

**Jamie Kelley**  
**Education Services Coordinator**  
**206-768-7157**  
**Monday-Friday**

As a 501(c3) independent, non-profit education organization, we strive to keep our education programs affordable to all schools and community based organizations. In an effort to help reduce costs for programs, our development department annually secures funds to dispense throughout the region for financial grants (sliding fees scale).

The Museum of Flight reserves the right to change or revise the Grant Assistance criteria at any time.



# GRANT ASSISTANCE APPLICATION

Please complete the top half of this application and fax to The Museum of Flight at 206-764-5707

## CONTACT PERSON:

## SCHOOL/NON-PROFIT ORGANIZATION:

|  |                               |                       |     |          |  |
|--|-------------------------------|-----------------------|-----|----------|--|
| NAME   | TITLE                         | SCHOOL / ORGANIZATION |     |          |  |
| GRADE / CLASS  | SCHOOL / ORGANIZATION ADDRESS |                       |     |          |  |
| SCHOOL PHONE NUMBER and FAX<br>(including area code) | CITY                          | STATE                 | ZIP | COUNTY   |  |
| BEST DAY / TIME TO REACH ME                          | SCHOOL DISTRICT NAME          |                       |     | DISTRICT |  |

Please call Denny Smith at 206-764-1384 to book a program.

NAME of scheduled program:

DATE of scheduled program:

CONTACT SIGNATURE

E-MAIL ADDRESS

DATE

Applicant school / organization has \_\_\_\_\_% of students on federal free and reduced lunch programs.

NUMBER OF YEARS SCHOOL HAS RECEIVED GRANT ASSISTANCE

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- 65-80% FRL-50% discount on programs
- 80-100% FRL-60% discount on programs

For sleepover programs, the maximum award granted is 50%.

Grant assistance is awarded after ALL other discounts are applied.

PRINCIPAL / DIRECTOR SIGNATURE

TITLE

DATE

**If a group cancels within a one week period, the group is liable for a \$50.00 cancellation fee.**

### The Museum of Flight office use only:

|                             |                                 |                    |
|-----------------------------|---------------------------------|--------------------|
| Program: _____              | Percentage of Award: _____      | Rev. Source #: MOF |
| VISTA #: _____              | Total Cost of Program: \$ _____ |                    |
| Date of Program: _____      | Grant Assist. Awarded: - _____  |                    |
| Date on VISTA: _____        | School/Group Pays: = _____      |                    |
| Date of Confirmation: _____ | Coordinator/Cost Center: _____  |                    |

Education Services Coordinator Signature: \_\_\_\_\_

Please fax financial assistance application to: 206-764-5707, Attention: Education Services Coordinator.