



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 Youth Service/Non-Profit Grant Assistance Program:

To qualify for grant Assistance, your Special Needs/Non-Profit youth organization must have a minimum of 35% students participation in a Federal free or reduced lunch program. Groups qualifying for grant assistance will receive a 50% discount on their choice of four programs: Dream of Flight, Flying Through Time, Great Gallery Aircraft Hunt, or Strange and Amazing Tours. **Grant assistance is awarded after all other discounts are applied.**

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 one week of submitting the application. 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.

To reserve a **Museum Explorations Program**, please call 206-764-1384.

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

Please contact us if you have any questions:

Stephanie Jones-Gunn
On-Site Education Coordinator
206-768-7152
Monday - Friday

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:

YOUTH SERVICE/NON-PROFIT ORGANIZATION:

NAME	TITLE	SCHOOL / ORGANIZATION			
GRADE / CLASS		SCHOOL / ORGANIZATION ADDRESS			
HOME PHONE NUMBER	CITY	STATE	ZIP	COUNTY	
BEST DAY / TIME TO REACH ME		SCHOOL DISTRICT NAME		DISTRICT NUMBER	

Choice of Museum Exploration Program:
(Please call scheduling to reserve at 206-764-1384.)

Dream of Flight
Flying Through Time
Strange and Amazing
Great Gallery Aircraft Hunt

	DAY TIME PHONE NUMBER (Including Area Code)
	WORK E-MAIL
	FAX NUMBER (Including Area Code)
Applicant school / organization has _____ % of students on federal free and reduced lunch programs.	

Please send me an Education Programs and Events Guide
 I am a K – 12 educator member of TMOF
 I would like K – 12 educator membership and professional development information emailed to me:

Number of years your school or organization has received grant assistance from the Museum of Flight:

1st year
 2nd or 3rd year
 4th or 5th year
 6th year or more

Date of Program:

CONTACT SIGNATURE

TITLE

DATE

PRINCIPAL / DIRECTOR SIGNATURE

TITLE

DATE

The Museum of Flight office use only:

Coordinator/Cost Center: Stephanie-cc350	Percentage of Award: 50%	Rev. Source #: MOF-NP/YS
VISTA #: _____	Total Cost of Program: \$ _____	
Date of Program: _____	Grant Assist. Awarded: - _____	
Date on VISTA: _____	School/Group Pays: = _____	
Date of Confirmation: _____	Program: _____	

The Museum of Flight Authorization Signature: _____