



CHILDREN'S MUSEUM OF SCIENCE + TECHNOLOGY

Science for Every Child – Field Trip Scholarship Application

Field Trip Scholarships are eligible for January and February 2019 program dates

APPLICATION DEADLINE December 1, 2018

Contact Name: _____ Grade: _____

School District: _____ School: _____

School Address: _____

E-mail address: _____ School Phone #: _____

Number of students who will attend the field trip: _____

Programs at CMOST:

___ Life Cycles (Grades 2-5)

___ The Weather Is Everywhere (Pre-K)

___ All About Animals (Grades Pre-K-1)

___ Where Do You Call Home? (Grades Pre-K-1)

___ Wonderful World of Weather (Grades K-3)

___ Molecularium (Grade K-4)

___ What's Eating What? (Grades 2-5)

___ River Journey (Monday and Tuesday ONLY, Gr. 2-5)

___ Electrifying Science (Grades 3-5)

___ Ready, Set, Reaction (Grades 3-5)

___ Amazing Adaptations (Grades 5-8)

Preferred Booking Dates (not guaranteed)

1. _____
2. _____

Preferred Booking Times (not guaranteed)

1. _____
2. _____

The Science for Every Child program provides free or reduced admission to qualifying school groups. CMOST will accept applications to accommodate groups on a **first come, first served** basis. **Programs must be booked for the months of January or February 2019. Dates will be assigned by CMOST. All grant applications must be submitted no later than December 1, 2018. Decisions will be made by December 17, 2018.**

Preference will be given to schools that offer a higher percentage of free or reduced lunches, Title I schools, and schools that are located more than 60 miles round trip from The Museum. There is limited funding for this program, both full and partial scholarships will be awarded. Programs are considered reserved once formal confirmation is sent by CMOST. Proof of transportation arrangements must be submitted to CMOST at least two weeks prior to the trip.

Return this registration form to CMOST, Science for Every Child, 250 Jordan Road, Troy, New York 12180. Or email it to chopkins@cmost.org. In exchange for museum programming, I agree to complete and return a program evaluation to CMOST.

Signature Date

Principal/Supervisor Signature Date

CMOST Use Only: Date Received _____

Date/Time Confirmation emailed _____