



Santa Barbara
Museum of Natural History
 & Ty Warner Sea Center

Museum Access Fund – Financial Aid Request

If a financial hardship exists for your school, you may apply for assistance. After making a reservation, please complete this form and return it to School and Teacher Services for review AT LEAST 4 WEEKS prior to your desired visit. You will be notified promptly of assistance availability.

Teacher in charge: _____ Date of visit: _____

Personal phone # _____ email: _____

School: _____ Location: _____
 City

Title 1 school School Wide Project Title 1 (SWP)

Please check with your administration to determine status. Enclose confirmation.

Grade level: _____ # of classes: _____ # of students _____ # of chaperones _____

Desired program/s: _____

at the Museum

at the Sea Center

1. Estimate the cost of the field trip.	Programs	\$ _____
	Transportation	\$ _____
	Total	\$ _____

2. Identify additional funding sources. Please enclose letters you may have sent requesting funding from any of these sources.

Service organizations (Kiwanis Clubs, Lions Clubs, etc.)	\$ _____
Parent organizations (PTA, PTO, etc)	\$ _____
Student fund raising efforts	\$ _____
Grants	\$ _____
Parents of participating students	\$ _____
Other	\$ _____
Total	\$ _____

3. Amount requested from the Museum Access Fund \$ _____

Additional information to indicate need may be submitted

I do hereby certify that the statements on the application form for financial aid are true and correct.

Signed: _____ Date: _____
 Teacher