

CLASSROOM-BASED ENRICHMENT PROGRAMS

APPLICATION

Please type your answers into the fields below.

Teacher Name(s):			
Email Address(s):			
Building:		Phone Number:	
Grade Level(s):	Subject Area(s):		
Describe the type of arts enrichment program in which you are interested (guest speaker, artist-in-residence, master class, field trip, etc.). If it is a specific program, please provide the name of the artist or program and the organization that provides it.			
Number of students involved:	Estimated cost of the program:		Desired time frame for the program:
How would this program be connected to your existing curriculum? Include any PA standards the program would address. www.pdesas.org			

Please save a copy of this form for your records and email it to: <u>contactus@tj-arts.org</u>.