



## Pretend City Scholarship Field Trip Application

Pretend City Children Museum features a small, interconnected city designed to “build better brains” through purposeful play, hands-on learning experiences, role playing, and educational programming. We hope to financially assist your school or organization in funding those children in need to create a more meaningful and impactful childhood.

Pretend City offers limited partial and full scholarship field trips to eligible schools in our community.

*Scholarship field trips are available September 2016-January 2017, Monday-Thursday only.*

### **Eligibility Requirements**

All schools and organizations must be in **Orange County** and meet one or more of the following criteria in order to be eligible for consideration:

- Title 1 Schools with 75% or more children on the free or reduced lunch program
- Preschool or Early Childhood Education Center on government assistance program
- Community Organizations (such as group foster care agencies) who provide service to children ages birth through 8 years from underserved communities.

### **Submission Process**

1. Fill out this packet in its entirety including all dates, program preference, and attendee figures.
2. Attach an official document on school or program letterhead with this application that confirms:
  - ◆ Percentage of population on free or reduced lunch program
  - ◆ Most recent audited financial statement *and/or*
  - ◆ Letter of Support from Principal or Director
3. Submit your completed packet via:

*Fax: (949) 428-3908*

*Email: [scholarships@pretendcity.org](mailto:scholarships@pretendcity.org)*

*or*

*Mail: 29 Hubble, Irvine, CA 92618*

All applications must be received a minimum of 6 weeks prior to your anticipated visit.

**Applications submitted without the aforementioned documents will not be reviewed.**



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Completion of this form and section do not constitute a confirmed reservation. Field trip visits are dependent upon availability and are scheduled on a first-come, first-serve basis.  
**Scholarship field trips are currently only offered from September 2016-January 2017, Monday-Thursday.**

## School Information:

School Name: \_\_\_\_\_ District: \_\_\_\_\_

Principal/ Director Name: \_\_\_\_\_ Email: \_\_\_\_\_

School Address: \_\_\_\_\_

Street Address \_\_\_\_\_ County \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

School Phone: ( ) \_\_\_\_\_ School Fax: ( ) \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: ( ) \_\_\_\_\_ Contact Email: \_\_\_\_\_

## Field Trip Request:

Type of Field Trip Requested (circle one): **Play Your Way** **Smile Day\*** **Go Foods Go!\*\***

Check out our website for details: [www.pretendcity.org/fieldtrips](http://www.pretendcity.org/fieldtrips)  
*\*includes dental screenings provided by Healthy Smiles of Orange County*  
*\*\*includes BMI screenings provided by Pretend City Staff*

Proposed Date: \_\_\_\_\_ Day of the Week (circle one): *Mon. Tues. Wed. Thurs.*

Alternate Date: \_\_\_\_\_ Day of the Week (circle one): *Mon. Tues. Wed. Thurs.*

Type of School (circle): *Preschool* *Elementary* *Other (specify): \_\_\_\_\_*

Grade Level and/or Ages Attending: \_\_\_\_\_ Number of Classes Attending: \_\_\_\_\_

# of Children Attending: \_\_\_\_\_ # of Chaperones\* Attending: \_\_\_\_\_

**Minimum #: 15 Children / Maximum #: 120 Children**  
Max of 45 students per guided lesson. If more children are present, there will be multiple lessons.

**\*Chaperone Requirements:**  
0-3 year olds—1 Adult : 3 Children  
4-7 year olds—1 Adult : 5 Children  
8+ year olds—1 Adult : 8 Children

*Failure to provide the required number of chaperones will not be granted admittance.  
Please keep the number of chaperones to a maximum of required chaperone ratio. Any chaperones above the required chaperone ratio will need to pay \$9.00/person prior to your visit. An invoice will be sent to your email regarding payment.*

Will you be arriving by bus? Yes No If so, how many? \_\_\_\_\_ Will you be arriving by car/van? Yes No

Does your school group have any children with special needs? (circle) Yes No

Special accommodations: \_\_\_\_\_



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## Funding Needs:

Please take into consideration all possible funding available to your school when determining your request. Please include the amount your school is able to contribute to the cost of Pretend City admission for students (if any).

Full Scholarship

Partial Scholarship  
Our school can contribute \$\_\_\_\_\_ to the price of admission for students.

If full scholarships are not available, will you be able to participate on a partial scholarship?  Yes  No

Are you a Title I School?  Yes  No

Are you a Head Start program?  Yes  No

Are you a government funded program or school?  Yes  No

Are you a non-profit with a school program?  Yes  No

Percentage of children in the program that qualify for free or reduced lunch: \_\_\_\_\_%

Percentage of children in the program that qualify for subsidized childcare: \_\_\_\_\_%

Does your organization receive financial support from the government?  Yes  No

If so, please describe:

\_\_\_\_\_

Primary Languages Spoken:

English \_\_\_\_\_% Spanish \_\_\_\_\_% Vietnamese \_\_\_\_\_% Other (Specify) \_\_\_\_\_: \_\_\_\_\_%

Describe why field trip fees are a barrier to your group:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain how students from your classroom will benefit from a field trip to Pretend City Children’s Museum:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## Award Term & Conditions

As outcome measurements are vital to fund this program, in order for schools, programs, and organizations to receive the scholarship they must agree in writing to the following:

- Completion of student/child pre- and post- test visit (if applicable).
- Completion of teacher and chaperone survey(s) during lunch day-of visit.
- Group “thank you” message to sponsoring organization containing:
  - Student/Child quotes regarding facilitated lesson and/or field trip experience.
  - Teacher commentary regarding facilitated lesson and/or field trip experience.

If awarded full scholarship, an award letter will be sent out to the organization via email. A confirmation will be sent via email if you choose to accept your award and partners have been confirmed. Submit all necessary paperwork by the deadline specified in your confirmation email if awarded a scholarship that require health screenings.

If awarded partial scholarship, an award letter and invoice will be sent out to the organization via email. Invoices must be paid two weeks prior to visit date via check (payable to: Pretend City Children’s Museum) or credit card. If submitting a Purchase Order, balances must be paid one week prior to visit date. A confirmation will be sent via email if you choose to accept your award and partners have been confirmed. Submit all necessary paperwork by the deadline specified in your confirmation email if awarded a scholarship that require health screenings.

Please return completed application to:

Mail: Pretend City Children’s Museum  
 29 Hubble  
 Irvine, CA 92618

Fax: 949-428-3908

or

Email: [scholarships@pretendcity.org](mailto:scholarships@pretendcity.org)

Please do not contact regarding status of application. Scholarship awards cannot be combined with any other school.

Schools and organizations may apply once per school year.

***I have read and understood Pretend City Children’s Museum policies and application requirements and verify all information contained in this application and all supporting documents to be true and correct.***

**Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal/Director Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_