

BOCA RATON MUSEUM OF ART

2019-2020 OFFERING FOR THE FIELD TRIP GRANT PROGRAM

The following application is a PDF form.
Please complete the application and submit it to Luis Glickman

Submission instructions are at the end of this form.

Be sure to read the Application Guidelines for further information.

BOCA RATON MUSEUM OF ART

Field Trip Grant Application 2019/2020

APPLICANT INFORMATION					
First Name	Mr./Mrs./Ms.		Last Name		
Job Title		Grade Level		Subjects	
Daytime Phone			Evening Phone		
Email					
How did you find out about the Boca Raton Museum of Art Field Trip Grant?					
<input type="checkbox"/> www.bocamuseum.org		<input type="checkbox"/> Museum e-blast		<input type="checkbox"/> Colleague	
<input type="checkbox"/> Newspaper in Education		<input type="checkbox"/> Other			

SCHOOL INFORMATION							
School Name							
School Address							
School City				State		ZIP	
School Phone			School FAX				
Type of School	Public	Private	Charter	Level of School	Elementary School	Middle School	High School
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD TRIP INFORMATION	
Name of Field Trip Event/Activity	Boca Raton Museum of Art Field Trip
Field Trip Destination	Boca Raton Museum of Art, 501 Plaza Real, Boca Raton, FL 33432
List Two Preferred Field Trip Dates	

Field Trip Curriculum Connection (Select all that apply)			
Fine Arts	<input type="checkbox"/>	Foreign Languages	<input type="checkbox"/>
Language Arts	<input type="checkbox"/>	Math	<input type="checkbox"/>
		Science	<input type="checkbox"/>
		Social Studies	<input type="checkbox"/>
Other			

Approximately how many students, staff and volunteers will be participating?			
Students		Grade Level	
Staff			
Volunteers			

BOCA RATON MUSEUM OF ART

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Field Trip Description: Describe the field trip you would like to plan for your students. Include objectives and describe how it will be applicable to your curriculum. (50 words or less)

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Benefits of Proposed Field Trip: How will students benefit directly from the proposed field trip? How will you measure student learning as it directly results from the field trip? (50 words or less)

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USE OF FUNDS

Transportation		Enter How the Grant monies will be utilized in whole dollars only. ATTENTION PBCSD EDUCATORS - The Fine Arts Department may have funds for grades K-12 for bus transportation. Please contact the SDPBC Fine Arts Office for further information.
Classroom Supplies		
Classroom Resources		
Substitute Teacher Cost		
Total		

VERIFICATION AND CERTIFICATION

The following school administrator, principal or superintendent is aware of and approves my application for a Boca Raton Museum of Art Field Trip Grant. If I am selected to receive a grant, this individual will verify my eligibility for the grant and the proposed field trip.

First Name	Mr./Mrs./Ms.	Last Name	
Job Title			
Daytime Phone (w/ area code)			
Email			

If selected to receive a Boca Raton Museum of Art Field Trip Grant, you will be **required** to complete and return a short follow-up survey regarding details of your field trip experience to the Boca Raton Museum of Art. This survey will also provide you the opportunity to comment on the overall process.

By typing my name, I certify that the information contained in this application is correct to the best of my knowledge. I understand that any Field Trip Grant received must be used for the field trip purposes described in this application. I authorize release of this information in this application to the Boca Raton Museum of Art. This application becomes the property of the Boca Raton Museum of Art. I agree that all decisions of the Boca Raton Museum of Art are final. If I am selected to be a recipient, I give permission to the Boca Raton Museum of Art to use my name, school name, photograph and information about the field trip for publicity purposes.

By checking this box I acknowledge having read the [guidelines](#) and accept the conditions set forth.

By typing my name, I agree to the [rules and eligibility](#) for submitting an application to the Boca Raton Museum of Art Field Trip Grant program. I understand that this electronic signature that has the same legal authority as my handwritten signature.

Applicant's Signature (Full Name)	
Date	

Print and fax:

561-394-2977

Attention: Luis Glickman
Education Department

Or

Print and mail:

Boca Raton Museum of Art
Attention: Luis Glickman
Education Department
501 Plaza Real, Boca Raton, FL 33432