





Up With School Arts
Sponsorship Application Form

Applicant's Name: _____ School: _____

Grade/Class Taught: _____ Subject:_____

Phone: _____ Email:_____

Program Title: _____ Amount Requested: _____

Number of students participating: _____ Date of program: _____

Subject: Music/Art/ELA etc.: _____

Class/Grade that will benefit: _____

Summary of Sponsorship Request/Program:

_____

_____

Outcome/Goal of Sponsorship/Program:

_____

_____

Requirements for sponsorship include:

- Provide public acknowledgement of Up with School Arts sponsorship when publicizing/promoting this event.
- Complete the post-program questionnaire that follows this request

Signature of Applicant:_____ Date:_____

Signature of School Principal:_____ Date:_____

Mail to:Up with School Arts, P.O. Box 204, Little Compton, RI 02837

Or email to: upwithschoolarts@gmail.com