The Sewing Labs

Scholarship Application Form

The Sewing Labs offer progressive skills training in personal sewing, industrial sewing, and quilting and sewing entrepreneurship. The instructional units and skills are taught in phases with the intent for the participant to complete & master each phase in order to earn a Job Skills Certificate.



The Sewing Labs also offers sewing related classes/workshops in personal sewing, quilting and beyond to expand learning in the Legacy of Sewing. These programs are offered to all community members regardless of financial needs.

Through the generosity of our supporters, *The Sewing Labs* is able to offer a limited number of partial and full scholarships to programs and events. If you are in need of a scholarship, submit this form with supporting documents - email to - TheSewingLabs@gmail.com

or mail to - The Sewing Labs at 526 Campbell St , Kansas City, MO 64106. For further information please call Linnca Stevens at 816.888.3051

D (0) 1: (
Program/Class applying for:	
Date of Program/Class : (if known)	
Name of Applicant:	
Mailing Address:	
Email address:	Phone #:
Reason for scholarship needs - Please note the	at proof documentation is required with this form.
Check the circle any of these items that you are currently rece	
 Social Security (SSI/SSDI) DSHS Benefits 	, , , , , , , , , , , , , , , , , , , ,
○ WIC ○ Veteran ○ Unemployed ○ Medicare	○ Disability
Do you have other barriers that need to be considered? Pleas	e list all that you feel need to be considered for
scholarships. (All information is kept confidential)	
2. Referral from supporting Agency - Persons red	questing full scholarship assistance must have a
supporting agency letter of referral. Form letter at	ached.
Type of scholarship desired: check one - \$\$ amount fi	lled in by TSL upon approval
☐ Volunteer Work Exchange You contribute 1 hr for every \$	\$5 of class fee in exchange for admission and participation
in the event. ** hours must be contributed prior to scholarship reque	
☐ Partial Scholarship You pay only for the cost of the class	materials (approximately half price- varies per class) \$
☐ Full Scholarship Your scholarship is fully funded through the	
TSL wants everyone to have an opportunity to participate in prog please fill out this form and submit 1-2 weeks p Please note - filling out this application doe	prior to the course start date for consideration.
For Office Use: Reviewed by: date:Approve 526 Campbell St, Kansas City	

Supporting Agency Letter of Referral

This form can be used for Agency Referral when submitting a request for Scholarship funding

** please note - submittal does NOT guarantee acceptance.

l,		, Title	
Agent for (list ag	ency name, address, phone #)		
•	his letter of Referral for our client		to be considere
	nto The Sewing Labs course of progr		
I validate that th	ney qualify and are supported by our	agency and services an	d therefore have a need
for scholarship f	funds for the TSL courses requested	below.	
Agent contact	information:		
Name/Title			
email address _			
Phone number			
The Sewing La	bs Course Information		
Course Title			
	For Office Use: Reviewed by: date:		