

Feed Their Imagination Application Information & Instructions

Overview:

The Reading Public Museum is doing its part to help school groups come for a visit. Thanks to our generous donors, we are pleased to be able to offer funds to help students of all ages and backgrounds come to The Museum.

Our *Feed Their Imagination* program has grown significantly over the past several years and we are looking forward to additional growth. With many schools having to eliminate field trips and other special programs due to budget cuts, this grant opportunity is more important than ever. Grants are available for all public, private, and parochial schools during designated times of the year. Opportunities for other groups are possible as well.

Eligibility:

All public, private, and parochial schools in any state are eligible to apply for a *Feed Their Imagination Grant*. There will be no appeals.

Grant Contact:

Wendy Koller, Director of Education 610-371-5850 x223 Wendy.koller@readingpublicmuseum.org

Application Instructions:

Please fill out the application **completely** – failure to do so may result in not receiving any funding. Please submit applications to: Education Department, Reading Public Museum, 500 Museum Rd. Reading, PA 19611 or email to: wendy.koller@readingpublicmuseum.org or fax to: 610-371-5632 Attn: Feed Their Imagination.

Other information:

- •Awarded funds are non-transferable, funds must be used in the allotted time frame by the requestor
- •Transportation invoices MUST be received by the due date listed in your award letter. Failure to do so may result in transportation not being reimbursed.
- •Funding for transportation is a reimbursement- school must provide proof of payment to be reimbursed
- •Funds must be used for museum and/or planetarium student admission first, remaining funds can be applied towards transportation if transportation was awarded. Funding may not be used for parent chaperones
- Awarded funds will NOT exceed the actual costs associated with the visit
- •All groups who receive funding will be required to pay a \$50 non-refundable reservation fee.
- •The Museum requests that any group who is awarded funds sends a thank you note from the students after their visit failure to do so may result in denied funding in following years
- •All complete applications will be considered equally.



Feed Their Imagination RPM Tour Grant Application 2025-2026 Academic Year

Feed Their Imagination Grants are currently available for visits to The Museum and Neag Planetarium.

Eligibility: All public, private, and parochial schools in any state are eligible to apply for a *Feed Their Imagination* School Tour Grant.

There will be no appeals.

Email to: wendy.koller@readingpublicmuseum.org

Questions: Wendy Koller, 610-371-5850 ext.223, wendy.koller@readingpublicmuseum.org

Spring 2025 (January 1 - December 30) November 30	Visit dates	Application deadline
Spring 2025 (Junuary 1 - May 30) Summer 2025 (June 1 - August 30) School information School name: School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Principal/Administrator Name: Email: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denical. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget-Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$\$		
School information School name: School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Principal/Administrator Name: Email: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Pallure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Denetration (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget-Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Museum Estimated Cost of Transportation School is responsible for arranging transportation \$ Estimated Cost of Transportation School serves are required to submit proof of paid invoice NO LATER than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. School is responsible for RSD discount will be made during review process) Total number of Students visiting the Museum Estimated Cost of Transportation	,	
School information School name: School phone: School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Principal/Administrator Name: Email: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for firee or reduced lunch? Pailure to complete this section will result in grant devial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum (@ \$5/Student) \$ Stimated Cost of Transportation \$ \$	Spring 2025 (January 1 – May 30)	April 30
School district: School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Principal/Administrator Name: Email: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum (@ \$5/Student \$ Total number of Students visiting the Planetarium But in the principal Administrator Name: City/State/Zip: Principal/Administrator Name: Principal/Administrator Name: Principal/Administrator Name: Branil: Phone: Carde of Students Grade of Students Fraction: Admission Waiver for Museum Fraction: Admission Waiver for Museum will result in grant denial. Grade of Students Grade of Students Grade of Students Grade of Students Fraction: Fraction: Grade of Students Grade of Students Fraction: Grade of Students Grade of Students Fraction: Grade of Students Grade of Students Grade of Students Fraction: Grade of Students Fraction: Fraction: Grade of Students Grade of Students Grade of Students Fraction: Grade of Students Fraction: Grade of Students Fraction: Fraction:	Summer 2025 (June 1 – August 30)	July 30
School district: School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Principal/Administrator Name: Email: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum (@ \$5/Student \$ Total number of Students visiting the Planetarium But in the principal Administrator Name: City/State/Zip: Principal/Administrator Name: Principal/Administrator Name: Principal/Administrator Name: Branil: Phone: Carde of Students Grade of Students Fraction: Admission Waiver for Museum Fraction: Admission Waiver for Museum will result in grant denial. Grade of Students Grade of Students Grade of Students Grade of Students Fraction: Fraction: Grade of Students Grade of Students Fraction: Grade of Students Grade of Students Fraction: Grade of Students Grade of Students Grade of Students Fraction: Grade of Students Fraction: Fraction: Grade of Students Grade of Students Grade of Students Fraction: Grade of Students Fraction: Grade of Students Fraction: Fraction:		
School district: County: Mailing address: City/State/Zip: Contact information Teacher Name: Email: Phone: Principal/Administrator Name: Email: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Pailure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum (@ \$5/Student \$ Total number of Students visiting the Planetarium Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Planetarium Budget- Please fill out completely (adjustments for RSD discount will be made during review process)	School information	
Contact information Teacher Name: Principal/Administrator Name: Email: Email: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum @ \$5/Student \$ Total number of Students visiting the Planetarium @ \$5/Student \$ Estimated Cost of Transportation \$	School name:	School phone:
Contact information Teacher Name: Email: Principal/Administrator Name: Email: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$	School district:	County:
Teacher Name: Email: Email: Phone: Phone: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$	Mailing address:	City/State/Zip:
Teacher Name: Email: Email: Phone: Phone: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$		
Email: Phone: Phone: Phone: Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation Students visiting the Museum Estimated Cost of Transportation Students visiting the Museum Estimated Cost of Transportation		
Phone: Phone: Ph	Teacher Name:	Principal/Administrator Name:
Request Information REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$	Email:	Email:
REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget-Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation Grade of Students Grade of Students Grade of Students Frailure to complete gladents Grade of Students Frailure to complete gladents Grade of Students Grade of Students	Phone:	Phone:
REQUIRED Percentage of students who are eligible for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget-Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation Grade of Students Grade of Students Grade of Students Frailure to complete gladents Grade of Students Frailure to complete gladents Grade of Students Grade of Students		
for free or reduced lunch? Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of Students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$		
Failure to complete this section will result in grant denial. If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$		Grade of Students
If grant is awarded, will your school require (Please check all that apply) □ Admission Waiver for Museum (\$5/Student) □ Admission Waiver for Planetarium (\$5/Student) □ Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. □ If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$		
If grant is awarded, will your school require (Please check all that apply) Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$	-	
Admission Waiver for Museum (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$		to a hard will that amake)
Admission Waiver for Planetarium (\$5/Student) Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation \$\$		
Reimbursement for bus transportation Schools are required to submit proof of paid invoice NO LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation Remindent to submit proof of paid invoice NO LATER than 3 weeks after visit may not be reimbursed will not provide transportation. © \$5/Student \$ Estimated Cost of Transportation	, , , , ,	
LATER than 3 weeks after group visit. Any invoice submitted more than 3 weeks after visit may not be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. ☐ If partial funds are awarded, will you still consider a group visit? ☐ Budget- Please fill out completely (adjustments for RSD discount will be made during review process) ☐ Total number of students visiting the Museum ☐ (a) \$5/Student ☐ Stimated Cost of Transportation ☐ Standard Total number of Students visiting the Planetarium ☐ (a) \$5/Student ☐ (b) \$5/Student ☐ Stimated Cost of Transportation		
be reimbursed. School is responsible for arranging transportation; The Museum will not provide transportation. ☐ If partial funds are awarded, will you still consider a group visit? ☐ Budget- Please fill out completely (adjustments for RSD discount will be made during review process) ☐ Total number of students visiting the Museum ☐ Total number of Students visiting the Planetarium ☐ Estimated Cost of Transportation ☐ Students visiting the Planetarium ☐ Students visiting the Plane		
transportation. ☐ If partial funds are awarded, will you still consider a group visit? ☐ Budget- Please fill out completely (adjustments for RSD discount will be made during review process) ☐ Total number of students visiting the Museum ☐ \$5/Student		
☐ If partial funds are awarded, will you still consider a group visit? Budget- Please fill out completely (adjustments for RSD discount will be made during review process) Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation If partial funds are awarded, will you still consider a group visit? ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process) ### (adjustments for RSD discount will be made during review process)		ging transportation; The Museum will not provide
Budget- Please fill out completely (adjustments for RSD discount will be made during review process)Total number of students visiting the Museum@ \$5/Student\$Total number of Students visiting the Planetarium@ \$5/Student\$Estimated Cost of Transportation\$		-:4
Total number of students visiting the Museum Total number of Students visiting the Planetarium Estimated Cost of Transportation @ \$5/Student \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1	
Total number of Students visiting the Planetarium Estimated Cost of Transportation © \$5/Student \$ \$		
Estimated Cost of Transportation \$	<u> </u>	
*		
Total Cost of visit/experience	•	
	Total Cost of visit/experience	Φ

Visit information	
If grant is awarded, what galleries, planetarium shows, or virtual options are you most interested in seeing?(complete lists of galleries, special exhibitions, and planetarium shows can be found on our web site)	
Please tell us in the space provided: The grade level of students you are planning on bringing and	
how receiving this grant will support your classroom and curriculum goals.	
now receiving this grant win support your classroom and carried and goals.	