



**TENNESSEE
PERFORMING
ARTS
CENTER**

**TRANSPORTATION ASSISTANCE
GRANT APPLICATION
2026-2027 Season for Young People**

To request funding, complete this form and return with a copy of your school's W-9 and a brief narrative of why your school is in need of a Travel Grant. Please cite supportive statistical data in your narrative including the percentage of economically disadvantaged students in the school. Please include a purchase order or payment receipt for your bus(es) at the time of submission.

Prior to sending this request, please contact the bus company or your school's transportation department to get an estimated round-trip cost. The school will be responsible for making its own travel arrangements and for paying the total cost at the time of billing. If your request is awarded, TPAC will reimburse up to **50%** of your field trip expenses.

Mail To: Tennessee Performing Arts Center
ATTN: Education Department
P.O. Box 190660
Nashville, TN 37219

Return by: May 7, 2027

School _____	Phone _____
Contact Person _____	Phone _____
School Address _____	
City _____ State _____	Zip Code _____
Performance Title _____	Total # of Buses _____
Attendance Date _____	Total Round Trip Cost _____
Signature _____	Date _____

TPAC will provide reimbursement funds after we receive a copy of the paid invoice and/or a copy of the checks by which invoices were paid. Application and receipts must be received by May 7, 2027. Reimbursement amount may be adjusted if the projected amount is different from the actual cost. The percentage designated will be honored. No reimbursement checks will be mailed past May 30, 2027.

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DO NOT WRITE ON THE BOTTOM OF THIS SHEET – TPAC USE ONLY

This is to designate that the above-named school will receive \$ _____ or **50%** reimbursement of transportation costs, whichever is less, for actual travel expenses incurred for this performance.

Final Reimbursement Amount: Pay \$ _____ to the above-named school. **Dept: INTERNAL-5880**
Copy of Billing/Payment Receipt Received (date) _____