



# Scholarship & Financial Aid Application

## Applicant (Guardian) Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Home Phone: (    ) \_\_\_\_\_ Active Email Address: \_\_\_\_\_

### Voluntary Applicant Information

How many years has the participant been enrolled at Integral Ballet? Has the enrollee received financial aid in the past? If so, when?  
\_\_\_\_\_

Marital and Employment Status of Parents or Guardians:  
\_\_\_\_\_

How many dependent children live in the enrollees home? Please list all extracurricular activities for each dependent child.  
\_\_\_\_\_

Semester and school year for which you are applying for financial aid:  
\_\_\_\_\_

Please indicate for which classes you plan to enroll your child if scholarship funds are awarded:  
\_\_\_\_\_

Please indicate for which classes you plan to enroll your child if scholarship funds are not awarded:  
\_\_\_\_\_

Please list any other information you wish the board to consider with your application:  
\_\_\_\_\_

Please briefly share the specific financial difficulties that you face this year:

**Enclose:**

- ✓ Proof of hardship form
- ✓ A signed copy of our scholarship and financial aid application letter
- ✓ The family's most recent W2 form.

Be sure to schedule an appointment to interview with the board by emailing [fred@integralballet.com](mailto:fred@integralballet.com) at least 6 weeks prior to the June meeting (if applying for fall) or the November meeting (if applying for spring). Applicants who do not interview with the board will not be considered.

\_\_ (Initial) Students will only be considered for a hardship scholarship for two academic years after which they may no longer apply. As outlined on the scholarship application, students obtaining any form of scholarship for study must study (dance) exclusively at Integral Ballet for the entire calendar year, participate in all company and recital performances, and student teach at least one class per week if they are of age.

\_\_ (Initial) I acknowledge that teachers and administrative staff, including board members who are also on the teaching or administrative staff, are barred from selecting scholarship recipients. Teacher input is considered only regarding the student's progress and performance during class time.

\_\_ (Initial) Infractions upon staff time including behavioral issues, absenteeism, late pick-up, late class arrival, delayed payments for costumes and other bills, and other administrative time will be considered with each scholarship application. Applicants will not necessarily be forewarned for documented infractions.

Signature:

Printed Name:

Date: