

Sisters Dance Academy
Scholarship Application

Personal Information:

Date of Application: _____

Name of Applicant: _____ **Birthdate:** _____ **Age:** _____

Parents/Legal Guardian: _____

Mailing Address: _____

Home Phone: _____ **Cell Phone:** _____

Email Address: _____

Scholarship you are applying for:

- Tuition Scholarship (Good for 6 full months of dance, 1 hr. per week, once application is accepted.)**
*This excludes summer dance workshops
- Dancewear Scholarship (good for up to \$45 of dancewear ordered through the Sisters Dance Academy or for Recital Costume Fees)**
- Both**

**Please answer the following questions to best help the scholarship committee
in their decisions for awarding the scholarship fund:**

1. Why is participation in the Sisters Dance Academy program important to you? (If you are filling this form out on behalf of your child, please respond how you think the dance program would benefit them).

2. Please provide any additional information which you feel would assist the Scholarship Selection Committee in making its decisions (whether it's concerning your financial situation, personal matters, or other reasons you should be considered).

The receipt of The Sisters Dance Academy Scholarship is a privilege. If the dancer does not comply with SDA rules or in any other way does not prove they truly want to participate, the scholarship fund may be withdrawn

upon serious evaluation of the dancer. Thank you so much for your application. You will be notified by phone whether or not the above dancer has been awarded The Sisters Dance Academy Scholarship.