

APPLICATION FORM
THE FOUNDATION FOR CREATIVE ACHIEVEMENT DANCE SCHOLARSHIP PROGRAM
WITH SOUTH SHORE BALLET THEATRE FOUNDATION INC.

PART I – FAMILY INFORMATION

Name of Student: _____ Age: _____ Date of Birth: _____

Home Address of Student: _____

Name(s) of Custodial Parent(s) or Legal Guardian(s): _____

Address(es) of Parent(s)/Guardian(s): _____

Home and cell phone(s) for Parent(s)/Guardian(s): _____

Number of other children and their ages: _____

Other family* members for whom there is a legal obligation of support (explain circumstances):

PART II – HARSDSHIP AND OTHER SPECIAL CIRCUMSTANCES (please explain in detail)

PART III – STUDENT PERSONAL STATEMENT

Please attach a separate statement, written personally by the student in their own handwriting and using their own words, explaining their desire for this scholarship and what they hope to achieve for themselves by taking these classes.

(continued on next page)

PART IV – FINANCIAL INFORMATION

Combined annual family* income from ALL sources, including taxable, non-taxable, pension, disability, social security, bank, investment, business, trust and other income (please provide complete copies of last 2 years of family* income tax returns): \$ _____

Combined annual family* NECESSARY living expenses, including rents, mortgages, car loans, insurance premiums, property taxes, utilities, food, clothing, personal grooming, medicines and medical care not covered by insurance, transportation fuel/tolls/fares to/from a place of employment or education, and similar BUT DO NOT INCLUDE costs of recreational travel, entertainment, gifts, pets, and similar expenses (please briefly itemize expenses on a separate page): \$ _____

Combined family* asset value, including ALL property owned by or available to any family* member(s) including homes, vehicles, businesses, bank accounts, investment accounts, retirement funds, whole life insurance available for loans, trusts from which distributions can be made to any member of the family*, and any other item(s) having an individual value over \$1,000 BUT DO NOT SUBTRACT THE VALUE OF ANY DEBTS OR LIENS on the property here (please briefly itemize assets on a separate page) \$ _____

Combined family* debt, including ALL documented secured and unsecured debts for which any family* member(s) are liable, including mortgages, liens, personal loans, court judgments and similar (please briefly itemize debts on a separate page) \$ _____

Signed under the penalties of perjury on _____, 20__.

Parent/Guardian: _____

Print Name: _____

Parent/Guardian: _____

Print Name: _____

ALL INFORMATION PROVIDED WILL BE KEPT STRICTLY CONFIDENTIAL

*For purposes of this Application, "family" means the group of persons consisting of the student applicant and the student applicant's sibling(s), parent(s), legally appointed guardian(s), and any other person(s) living with any of them for whom any of them has a legal obligation of support, whether any member(s) of that group live(s) with all of the others in the group or live(s) separately.