

SCHOLARSHIP APPLICATION



At Lakeside we believe structured dance gives students the confidence to move mountains! We are pleased to offer limited scholarships for students enrolled in our school-year dance program.

Student Name: First _____ Last _____

School: _____ Grade in School: _____ Student Birthdate: ____/____/____

Parent Name: First _____ Last _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Previous Dance Experience? ☐ Yes ☐ No

Have you danced at Lakeside Dance in the past? ☐ Yes ☐ No

Please describe past dance experience (years, styles, studios): _____

Please describe your current need and why you are seeking a dance scholarship: _____

Would you accept a partial scholarship? ☐ Yes ☐ No

Have you received a past scholarship from Lakeside? ☐ Yes ☐ No

I understand that completion of this application is not a guarantee that my child will receive a scholarship

PARENT SIGNATURE _____ DATE ____/____/____

**Personal information will remain confidential and scholarship recipients will be notified individually*