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Scholarship Application

Personal Information

Student Last Name _____ Student First Name _____
 Age _____ Grade _____
 Parent/Guardian Last Name _____ Parent/Guardian First Name _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Email _____
 Primary Phone _____ Secondary Phone _____

Household Financial Information

Gross Annual Household Income _____
 Are you a single earner household? _____
 How many dependents? _____

Have you previously applied for Scholarships with Broadway Center for the Performing Arts?

Does your family receive public assistance? If so, please **circle** programs that apply to your household:

WIC
 DSHS
 TANF
 Copes/In-home assistance
 Medical Need
 WorkFirst

Further Scholarship Application Requirements

In addition to this form, please submit:

1. A completed **Class Registration** form.
2. A **Letter of Request**.
3. **\$25 fee w/ application** to be credited toward tuition.
4. Any other **class-specific requirements** (see class descriptions for additional enrollment requirements).

Letter of Request

- Both student and parent/guardian names
- Address
- Phone
- Email
- Student's grade and age
- Class(es) interested in attending
- Amount of aid requested, Scholarship award based on funds capacity and need
- Additionally, please address the following as it pertains to your situation: current financial situation including brief explanation of expenses and income, number of members in household, your unique financial circumstances, and special considerations and/or specific needs as it pertains to your financial aid request.

Please be specific and keep your requests to no longer than one page in length.

¿Si usted desea traducción de esta forma? Por favor llame: 253-573-2517