



**BROOKE DESNOES BALLET ACADEMY & BALLET SOUTH 2024-25
TUITION ASSISTANCE SCHOLARSHIP REQUEST**

The below form should be completed to apply for a Tuition Assistance Scholarship. All applications will be reviewed by the Friends of Ballet South Board of Directors. Limited funds are available each year for scholarships and recipients will be determined on a need basis. Applicants who are current students must also be in good standing at Brooke Desnoes Ballet Academy - meaning the student attends class regularly plus demonstrates good behavior and a desire to learn and participate. The scholarship level will be granted according to each financial situation and will cover 25%, 50%, 75% or 100% of the tuition.

Students will only need to apply for scholarships once per year. However, scholarships will be redeemed on a per semester basis and may be revoked before the second semester if the student is no longer in good standing with the school.

Parent's /Guardian's Name _____

Parent's /Guardian's Phone Number _____

Family Mailing Address _____

Email Address _____

1st Student's Name _____

Age _____ Birthdate _____ Class(es) Requested _____

2nd Student's Name _____

Age _____ Birthdate _____ Class(es) Requested _____

3rd Student's Name _____

Age _____ Birthdate _____ Class(es) Requested _____

Parent /Guardian Questionnaire

Please share with us why you are requesting this scholarship _____

Are you employed Yes No

If yes, where? _____

If married, is the spouse employed? Yes No

If yes, where? _____

How many people are in your household? _____

Please estimate your current annual household income _____

Are you receiving or do you qualify for any governmental subsidy or financial assistance such as reduced lunch programs, social security, disability, etc? Yes No

If yes, please specify _____

Amount of tuition you offer to pay each month (if any) _____

Are you willing to volunteer your time and skills, if needed? Yes No

I certify that the information I provided in this application is truthful and accurate:

Signature: _____

Date: _____