



The Nancy Wood Scholarship Fund Application Guidelines

Purpose: The purpose of the Nancy Wood Scholarship Fund is solely to assist students of dance, ages 10 and up, with financial aid so that they may receive dance training. The committee considers two areas when making decisions about assistance: 1) The evidence of financial need in the student's family that would make it difficult or impossible for the student to attend class without financial assistance and 2) The student requiring assistance regularly attends class, has a positive attitude about dance and always puts forth an attitude to achieve. The Scholarship Fund is not a reward for dance achievement, but a vehicle to allow all students, regardless of economic circumstance, the ability to have dance training.

Deadlines to Apply

For tuition needs from August 1 to December 31: August 1
For tuition needs from January 1 to May 31: December 1
For tuition needs from June 1 to July 31: May 1
For the Lorraine Cranford Summer Dance Workshop: May 1

These are strict deadlines. Applications received after the deadline will not be reviewed.

Scholarship Policies

- Tuition for dance class will only be awarded to students and company members attending Western Arkansas Ballet.
- Scholarship applications must be completed for each period a student wishes to receive funding. The "Initial Application Form" must be completed for the first tuition request. Any subsequent request will require completion of the "Re-Application Form."
- All dancers requesting financial assistance must pay all required expenses, including registration fees and tuition, until a decision has been made regarding the request for financial assistance. Should a scholarship be awarded, the dancer's guardians are responsible for paying any expenses or fees, including registration, tuition, dancewear, and any production fees, in excess of the scholarship award in a timely manner throughout the year. Failure to pay expenses or fees in excess of the scholarship award may result in the immediate suspension of the dancer's scholarship award.
- Upon acceptance of a scholarship award the dancer agrees to be fully committed to the activities of the school and/or company. If a student voluntarily withdraws from classes prior to fulfilling their commitment for the semester, all scholarship funds awarded are expected to be repaid to the Nancy Wood Scholarship Fund upon withdrawal.
- A separate "Lorraine Cranford Summer Dance Workshop" scholarship application form must be completed in order to receive funding for that program.
- In order for an application to be considered, all portions of the application form must be completed. It is imperative that the scholarship committee be given the exact amount for which the student is applying. If you need assistance in computing the amount, contact the Executive Artistic Director or Administrator at Western Arkansas Ballet.
- Application forms are available at the Western Arkansas Ballet Studio, or by calling 785-0152.
- The scholarship committee looks favorably on those students who contribute in an appropriate manner to the school and/or company.

The Nancy Wood Scholarship Fund

Re-Application Form

Fill out completely. Incomplete forms will not be processed, and will be returned to the applicant for completion.

Student's Name _____ Date of Birth _____

Address _____

City/State/Zip Code _____

Parent/Guardian Name(s) _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

FINANCIAL INFORMATION (To be completed by parent/guardian)

Mother/Guardian's Occupation and Employer _____

Mother/Guardian's Total Annual Income \$ _____

Father/Guardian's Occupation and Employer _____

Father/Guardian's Total Annual Income \$ _____

Other Income (alimony, child support, unemployment, other assistance) \$ _____

Total number of children living at home _____

How much can you afford to pay each month \$ _____

I. Amount of Request

Tuition

If your request is for tuition, please complete the following:

| Name of Class | Monthly Class Tuition | Monthly Amount Requested |
|---------------|-----------------------|--------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Total Monthly Requested Tuition: _____

Number of months assistance required _____ x Total Monthly Requested Tuition _____ =

(Fall semester = 4 months; Company Fall semester = 5 months; Spring semester = 5 months)

Total Request \$ _____

Other Needs

Check the category for which you are requesting funds and the exact amount of your request. A separate application is required for the Lorraine Cranford Summer Dance Workshop.

| | <u>Amount of Request</u> |
|--|--------------------------|
| ___ Workshop (other than Lorraine Cranford Summer Dance) | _____ |
| ___ Shoes | _____ |
| ___ Leotards/Tights | _____ |
| Total Request | _____ |

If you are denied financial assistance, will this absolutely prohibit your child from dancing this season?

Yes _____ No _____

Is this dancer involved in any other sports or activities during the ballet season, including school sanctioned sports as well as community programs? Yes _____ No _____

II. Statement of Financial Need

The Nancy Wood Scholarship Fund is solely for the purpose of aiding students who are financial unable to meet tuition and supply requirements in order to attend dance class. It is not a reward for achievement, but a vehicle to make dance accessible to everyone regardless of economic circumstance. Please use the space below to state why your child should be awarded financial assistance.

Please describe the circumstances affecting financial need and the reasons for this request, including any additional conditions that affect your financial position and that you feel the committee should be aware of that are pertinent to your situation.

III. Other Activities.

Please use the space below to record your other activities including church, school, and community.

I hereby certify that all of the above information is true and correct and acknowledge that failure to complete this entire application and/or submitting false information may disqualify my child from financial assistance. I also acknowledge that I have received and read a copy of the Scholarship Policy and agree to adhere to its provisions.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____