



Financial Need Based
Scholarship Application
2018-2019

Student Information

Name: _____ Level: _____

Previous Financial Need Based Scholarships

<u>Name of Institution</u>	<u>Total Yearly Tuition</u>	<u>Awarded Financial Aid</u>	<u>Year(s) Awarded</u>

Household Income

Please list all persons, related & not related who live in the household & share expenses.

<u>Name</u>	<u>Occupation</u>	<u>Employer</u>	<u>Income Reported</u>

Additional annual income from other sources: \$ _____

Dependent Children

Please list all dependents in the household and indicate financial assistance received each year from educational and/or recreational institutions.

<u>Child's Name</u>	<u>Name of Institution</u>	<u>Total Yearly Tuition</u>	<u>Awarded Financial Aid</u>	<u>Year(s) Awarded</u>

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Additional Information

Please describe any extenuating circumstances or additional information not reflected in this application or on your 2016 earnings statement(s) and tax return(s).

Acknowledgement

I certify that all information provided is true and that all household income is reported. I understand that incomplete, false and omitted information will hinder the scholarship process for my child. I understand that the information provided will be protected and kept confidential by Manhattan Youth Ballet.

Parent's Signature

Date

Student's Signature

Date

Please return by **Wednesday, September 5th, 2018** to:

Erin Fogarty, Director of Programming
ekfogarty@manhattanyouthballet.org

Manhattan Youth Ballet, 248 W. 60th Street, New York, NY 10023

You MUST include a copy of your 2017 Tax Return(s) with Earnings Statement(s).