



## APPLICATION FOR TUITION ASSISTANCE

*Toledo Ballet appreciates the challenges families are encountering during these difficult times. We also recognize the importance of dance in our students' lives and we want to enable them to continue their participation and encourage their progress.*

*Toledo Ballet has a limited number of Tuition Assistance Awards available.*

*Please complete this confidential application and submit to Toledo Ballet by the following date:*

- **August 20, 2020 for returning students**
- **August 20, 2020 for new students**

*You will receive written notification no later than September 1, 2020 as to whether or not your student will receive Tuition Assistance and the amount of the award. It is our goal to keep our students dancing. If you are struggling to meet tuition requirements, please submit this form, even if it is after the date listed above. We will consider all applications.*

All families are encouraged to apply regardless of income. We recognize that we are living in uncertain times. Please complete the application so we can fully understand your situation. If your student receives Tuition Assistance, the amount of the award will be deducted from the total cost of tuition.

*Determination of the initial award for the Fall Session and continuation of the award for Spring and/or Summer Sessions will be based upon fulfillment of the following criteria:*

- Enrollment in at least one (1) classical ballet class
- Regular and punctual attendance
  - Two consecutive absences without acceptable excuses, or more than three absences within the Fall, Spring or Summer Sessions, without notification or explanation or fulfillment with make-up classes, will result in withdrawal of Tuition Assistance.
  - Attendance at less than 90% of the classes in which the recipient student is registered will result in withdrawal of Tuition Assistance.
- Involvement in all dance-related performances that are appropriate to the student's level of dance. These include, but not limited to, Toledo Ballet's Annual Showcase, *Nutcracker*, Toledo Ballet's Spring Production, as well as Toledo Ballet's open houses and fundraising activities generally planned by Toledo Ballet Guild. Parents of younger students receiving awards may also be asked to volunteer at these events, as each of them require in-depth involvement of volunteers for success





### APPLICATION FOR FINANCIAL ASSISTANCE SCHOLARSHIP

Please indicate which session(s) you are applying for tuition assistance:

Fall Session		Spring Session		Summer Session	
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**SECTION I:**

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex:  M  F

Student's Cell #: \_\_\_\_\_ Can this cell # receive Text Messages:  YES  NO

Student's Email Address: \_\_\_\_\_ Grade in School: \_\_\_\_\_ School: \_\_\_\_\_

Number of Years at Toledo Ballet: \_\_\_\_\_ Current Ballet Level at Toledo Ballet: \_\_\_\_\_

Please list additional activities: \_\_\_\_\_

Please list additional dance training (including classes at Toledo Ballet), school name and number of years attended:

List goals you would like to accomplish at Toledo Ballet: \_\_\_\_\_

Students: Please attach a short essay or email a video to \_\_\_\_\_, sharing the reasons you love to dance at Toledo Ballet.

**SECTION II:**

#### APPLICATION FOR TUITION ASSISTANCE PARENT / GUARDIAN INFORMATION

Parent/Guardian # 1 \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Can this cell # receive Text Messages:  YES  NO

Parent/Guardian # 2 \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Can this cell # receive Text Messages:  YES  NO

Parent/Guardian #1 Employer: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Parent/Guardian #2 Employer: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Total estimated combined income from both parents/guardians, including other sources of income, i.e. child support, investment income, etc. \_\_\_\_\_

**SECTION III:**

Name(s) of Other Dependents	Date of Birth	School/College	Total Tuition Amount

**Who assumes primary responsibility for payment of tuition and other educational costs?**

\_\_\_\_\_

**SECTION IV:**

Please provide any additional information that may assist the Financial Assistance Committee in understanding your circumstances and need for financial aid:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION V:**

I verify the information contained in this application is complete and true, best to my knowledge.

Student's Name: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION DEADLINE:**

- ***August 20, 2020 for returning students***
- ***August 20, 2020 for new students***