



## SCHOLARSHIP APPLICATION

Winter, Spring, and Fall Semester

**\$15 SCHOLARSHIP AUDITION FEE IS DUE AT THE TIME OF THE AUDITION**

YOU WILL NOT BE REQUIRED TO PAY THE REGISTRATION FEE

THIS FORM MUST BE COMPLETED FOR EACH STUDENT PER FAMILY

Your application will not be processed without the following: A) Most recent year's Federal Income Tax form (first two pages); B) two recent paycheck stubs; C) Proof of child support and/or social security benefits **OR** if unemployed, a certified letter verifying unemployment status to Natalie Rogers-Cropper by deadline.

CONTACT THE GARTH FAGAN DANCE OFFICE AT (585)454-3260 OR [GFDSCHOOL@GARTHFAGANDANCE.ORG](mailto:GFDSCHOOL@GARTHFAGANDANCE.ORG)

WITH QUESTIONS. PLEASE COMPLETE BOTH SIDES OF THIS FORM AND PRINT ALL INFORMATION LEGIBLY.

**\*INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED\***

Date \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (*primary*) \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Parent/Guardian: (*if applicant is under 18*) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Occupation of Applicant/Parent or Guardian \_\_\_\_\_

Employer Name (leave blank if unemployed) \_\_\_\_\_

Phone: (work) if applicable \_\_\_\_\_

Marital Status: \_\_\_\_\_

Spouse Name: (*please indicate N/A if not applicable*) \_\_\_\_\_

Spouse Occupation: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Phone: (*work*) \_\_\_\_\_

OVER →

**Circle one:**      **Full time employment**                      **Part time employment**                      **Unemployed**

Indicate with a circle Number of People in your household and the closest number to your current income level per household (including public assistance, child support, parents/guardians income etc.):

<b>Number of People in Household</b>	<b>Income</b>
One	\$11,800
Two	\$16,000
Three	\$20,100
Four	\$24,300
Five	\$28,400
Six	\$32,600
Seven	\$36,700
Eight	\$40,900
	Over \$50,000

**ASSISTANCE CRITERIA**

- (1) Attendance is mandatory.  
All absences must be pre-approved with instructor before classes begin. Student must provide instructor with written excuse upon returning to class. Instructor then has final say as to legitimacy of excuse and resulting status of scholarship.
- (2) One or more of the following student duties will be assigned to work study and/or scholarship students:
  - a. Demonstrating in technique classes;
  - b. Supervision of younger students at lunch time;
  - c. Assisting school administrator at events (i.e. Open Houses, Fringe, Home Season, etc.);
  - d. GFD offices, Studio and Dressing Room maintenance;
  - e. Registration and sign-in;
  - f. Miscellaneous office duties.
- (3) If student has or has been exposed to any contagious virus or disease prior to or during the Summer Movement Institute, student will not be allowed to participate without written approval from a doctor that the virus/disease is no longer a threat.

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I, \_\_\_\_\_ understand that by being a recipient or the parent/guardian of a recipient of a Garth Fagan Dance School Scholarship award, I agree to the terms described above. I also understand that I/my child will attend all of the classes designated for my/his/her age group on Tuesdays, Thursdays, and/or Saturdays at the designated hour, and that failure to attend for any reason enters the status of the assistance into the discretion of the instructor. I understand that the terms of the assistance, scholarship, and work-study are non-negotiable. Classroom progress, behavior, adaptability, and discipline will be taken into consideration to determine if the scholarship will be continued.

Name of Student (please print): \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (if recipient is under 18): \_\_\_\_\_