



APPLICATION ARTS Scholarships 2020

Applications must be submitted by 4:00 p.m. on Friday, February 28, 2020

Part 1. All questions on pages 1 & 2 must be answered COMPLETELY and ONLY by the student – please do not use pencil.

Name:

Address:

City:

State:

Zip:

Date of Birth:

Sex:

Email address:

Home Phone:

Other Phone:

School name & city, current grade level:

Please list arts-related clubs, activities, or classes:

Please write a brief statement describing your past artistic experiences (attach additional page or continue on back if more room is needed):

What are your future artistic goals?

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What other scholarships or tuition supplement have you applied for and/or received?

* * * * *

If awarded a scholarship, what summer arts program do you want to attend (list of suggested programs enclosed):

Name of institution and/or program: _____

Address of institution and/or program: _____

Telephone number of institution: _____

Program title (if known): _____

Dates of program (if known): _____

Program costs - Tuition: _____ Supplies:*

*The Providence Performing Arts Center reserves the right to determine what constitutes basic supplies for course study. A supply list must be forwarded in advance for approval by the Providence Performing Arts Center.

Check off these items as they are enclosed **that must accompany this application:**

- Parent/Guardian Part 2
- Sponsor Part 3
- Sample artwork (up to three pieces)

If awarded a scholarship, I (student) will complete the summer program and participate in a follow-up questionnaire evaluation of my summer arts experience conducted by the Providence Performing Arts Center.

Student signature: _____ Date: _____

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Parte 2. Para ser completado por un padre / tutor - página 3 - por favor imprima

El nombre del estudiante _____

Mientras que la necesidad económica no será el único factor determinante, es el objetivo de la Comité de becas a aquellos estudiantes con talento que de otro modo no tienen la oportunidad de asistir a un programa preferido. Toda la información proporcionada se mantendrá en la más estricta confidencialidad y se compartirá solo con los miembros del Comité para evaluar la necesidad financiera.

El ingreso anual de nuestra familia es:

- \$0-\$20,000 \$20,000-\$40,000 \$40,000-\$60,000 \$60,000-\$80,000 \$100,000 +

Hay ____ niños en nuestro hogar apoyados por este ingreso.

Describe cualquier otra circunstancia que pueda afectar la capacidad de la familia para pagar el programa de artes de verano elegido (como el número de miembros de la familia, gastos médicos, etc.).

Si a mi hijo se le otorga una beca, yo (padre / tutor) apoyará sus esfuerzos para completar el programa de artes de verano.

Firma del padre / tutor

Fecha:

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Part 3. To be completed by a Sponsor (adult not related to family) – page 4 – please print

Student's name _____

Please describe your relationship with the student:

I recommend this student to receive a scholarship because:

I (sponsor) personally know this student and his/her artistic abilities and goals and recommend him/her to receive a scholarship.

*Sponsor name (please print): _____

*Mailing Address: _____

Phone: _____ *Email address: _____

*Date: _____

**required*

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