

Rhythm Room Scholarship Application(revised 9/05)

Today's Date _____ Program requesting Scholarship for _____

Parent(s) Name _____ Marital Status _____

Child name(s) _____ Grade in school _____ Students GPA (at last report) _____

Siblings Names _____

Phone 1 _____ Phone 2 _____

Full Address _____

Email _____

Annual Household income _____

Employer name/address/phone _____

List 2 references below, include name, phone and relationship to you:

1. _____

2. _____

Scholarship is for Adult _____ Teen _____ Child _____

Classes of interest: _____ (include day/time)

Type of need: 1/2 price classes _____ OTHER _____

Description of the "need" situation? (Example- Single parent, job lay off)

We have no funds for scholarships at this time. We hope to fundraise in the near future. Could you help with these fundraisers? _____

We expect the students to be consistent with their classes since we are reserving space for them! Students missing 2 consecutive classes will lose their scholarship.

Please let us know if your situation changes. We are limited on how many scholarships are available. We are offering this opportunity to those in transition, therefore, they are offered for a limited time! We appreciate you honesty and open communication.

Because there is limited scholarship, students accepting scholarship will be expected to be on time and follow all policies as outlined in the contract. The above info will remain confidential and will

only be processed by the Program Director. If scholarship is available for you, you will receive an email from the Director.

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Parent signature

date