

# COLLAGE DANCE COLLECTIVE

## SCHOLARSHIP REQUEST FORM

Student Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent Email: \_\_\_\_\_

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

\_\_\_\_\_

Dance School: \_\_\_\_\_ Years of Ballet: \_\_\_\_\_

Years on Pointe: \_\_\_\_\_

Ballet Teacher Name: \_\_\_\_\_

Ballet Teacher's Phone Number: \_\_\_\_\_

In the space provide below, please describe what you hope to gain from the Summer Intensive:

In the space provided below, please share your long-term dance goals (attach additional sheet if necessary):

**All scholarship requests must be received by April 10, 2020 with a DVD or video link.**  
**Decisions will be announced by April 24, 2020.**