

Scholarship Aid Form



PO Box 80892
Springfield, MA 01138
413-739-1983
www.dramastudio.org
info@dramastudio.org

At the Drama Studio we are committed to making our program available to all. It is the theatre's loss if a talented student does not enroll due to financial concerns. Please read through the following scholarship categories and fill out all sections that could be part of your financial aid package. Please don't hesitate to call with questions or for help in filling out this form.

Student Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Mother/Guardian Name: _____ Father/Guardian Name: _____

Occupation: _____ Occupation: _____

Employer: _____ Employer: _____

Address: _____ Address: _____

Business phone: _____ Business phone: _____

Name and address of any parent not living at student's address:

Family Income Scholarships:

Families seeking financial aid must submit an application prior to the first day of class and are required to provide a copy of their most recent IRS form 1040 showing their household income on Line 37 and the number of deductions for children in the household. If you do not have a 1040, you must provide other documentation about income and number of dependents, i.e. DTA statement, SS statement, or a letter stating your income. If you send copies of pay stubs or unemployment insurance stubs, be sure to send stubs for at least two pay periods.

Family annual income: \$ _____ (line 37 on IRS 1040)

Names of other dependent children: _____

The Studio has a limited number of scholarships available for students who cannot afford the full tuition. The following scale is used to determine the level of support:

Rates are as follows:

(Scholarships apply to one course for each eligible student)

Family Income	1 child	2 children	3 children	4 children
\$40-50,000	15%	20%	25%	30%
\$30-40,000	35%	40%	45%	50%
\$20-30,000	55%	60%	65%	70%
Under \$20,000	70%	75%	80%	85%

We will consider adjustments if special circumstances apply.

We must have a completed registration form before we can consider any scholarship aid.

Date: _____

Student Signature: _____

Parent/Guardian Signature: _____ Required forms attached: _____

