

**SCHOLARSHIP APPLICATION FORM
PARTNERS IN DANCE SCHOLARSHIP FOR DANCE MAJORS**

Name _____ SS# _____

Current address _____

City _____ State _____ Zip Code _____

Current phone _____ Email _____

Overall GPA _____ Dance GPA _____

How do you feel you meet the qualifying criteria for this scholarship?

Please indicate below any financial need the faculty should take into account in considering this application.

I have read and understand the scholarship guidelines for the Partners in Dance Scholarship for Dance Majors.

Signature

Date _____