



STAGE RIGHT! SCHOOL FOR THE PERFORMING ARTS & THEATRE COMPANY

Financial Aid Scholarship Application

Stage Right! seeks to enroll all students wishing to participate regardless of ability to pay. Partial and full scholarship awards are based on financial need and the number of applications received. Due to a limited amount of funds, it is possible that not all applicants will be awarded the full amount of aid requested.

Students must reapply for financial aid annually. Assistance is awarded on a per-session basis.

Because financial situations change, we require a NEW application yearly (or as needed, based on your financial situation).

We also reserve the right to consider student's attendance records and commitment to the program when awarding financial aid.

Student Information

Student Name			School	Grade
Address			Email	
City	State	Zip	Home Phone	Cell Phone

Contributing Parents/Guardians

Parent/Guardian #1 Information

Parent/Guardian #1 Name			Occupation	
Address			E-Mail	
City	State	Zip	Home Phone	Cell Phone
Total Income Last Year			Expected Income This Year	

Parent/Guardian #2 Information

Parent/Guardian #2 Name			Occupation	
Address			E-Mail	
City	State	Zip	Home Phone	Cell Phone
Total Income Last Year			Expected Income This Year	

Parent/Guardian #3 Information

Parent/Guardian #3 Name			Occupation	
Address			E-Mail	
City	State	Zip	Home Phone	Cell Phone
Total Income Last Year			Expected Income This Year	

Form is Double Sided - Please Complete Both Sides

Please list any financial information/circumstance you feel may have bearing on this application

What is an amount (for the classes/programs desired) that you COULD potentially pay?

Certification - Parent/Guardian #1

This information has been provided complete to the best of my knowledge. I Acknowledge Stage Right will use this information to provide a financial aid decision, and that this information will be kept confidential. **As I prerequisite, I am willing to offer proof of the above information.**

Print Name	Signature
Date	

Certification - Parent/Guardian #2

This information has been provided complete to the best of my knowledge. I Acknowledge Stage Right will use this information to provide a financial aid decision, and that this information will be kept confidential. **As I prerequisite, I am willing to offer proof of the above information.**

Print Name	Signature
Date	

Certification - Parent/Guardian #3

This information has been provided complete to the best of my knowledge. I Acknowledge Stage Right will use this information to provide a financial aid decision, and that this information will be kept confidential. **As I prerequisite, I am willing to offer proof of the above information.**

Print Name	Signature
Date	

Submission

Please mail or deliver this application with last year's/the most recent income tax return summary sheet for the above contributors attached to the attention of:

Christopher McAllister
Artistic and Educational Director
Stage Right Inc.
105 W 4th Street
Greensburg, PA 15601
contact@stagerightarts.com / cmcallister@stagerightarts.com