



Student: _____ Age _____ Gender: Male / Female
Last Name First Name Middle Initial

Parent: _____ Social Security No. _____
Last Name First Name Middle Initial

The Dream in Color Foundation's scholarship policy is designed to promote students' disciplined study of high-quality dance instruction. Scholarships are awarded to students of all minority groups based on financial need, artistic ability, promise, and availability. Scholarships are awarded each session for students in the Community Dance Program and Dance Company Program.

- Students enrolled in DICF's Company Dance Program receive priority in scholarship decisions.
- DICF will strive to have the size of scholarship awards correspond to the number of classes students are taking. For example, advanced students taking a large number of classes will generally receive larger scholarship awards than beginning students taking two or three classes a week.
- Scholarship awards are not final until both the student (and parent if the student is younger than 18 years old) and DICF complete and sign the Scholarship Award Agreement. Students who fail to adhere to the conditions of the agreement risk losing their scholarship.
- Students who have outstanding balances may be ineligible for scholarships.
- Students must take at least one ballet class in order to be eligible for a scholarship.
- Students who have completed at least two session of study at DICF receive priority in scholarship award decisions.
- Scholarship recipients must maintain a minimum 2.0 Grade Point Average to remain eligible for assistance.
- Scholarships will range from 20% to 40% of the tuition cost. Only severe hardship cases will be reviewed and/or awarded scholarships above 60%.

I. All students who wish to receive a scholarship award must submit the following:

1. Complete Application Form and Scholarship Application.
2. Gather supporting documentation for Scholarship Application form.
 - a. Proof of Residency demonstrating the student's legal street address
 - i. Student's School Record (e.g., transcript, report card), or
 - ii. Student's Medical Record.
 - b. Proof of Household Income for the parent(s) and/or legal guardian in which the student resides
 - i. Signed copy of 2004 Federal Income Tax Form with W2s attached, or
 - ii. Most recent TANF Form, or
 - iii. Most recent SSI Notification.
 - iv. If unemployed – most recent unemployment verification
3. Deliver complete forms and supporting documentation to DICF offices on or before the date of enrollment and/or the Placement/Scholarship Audition.
4. Attend the Placement/Scholarship Auditions on date TBD (or by Appt).
5. Pay the \$20 Registration/Audition fee for each session
6. Be admitted into the studio program.
7. Complete and sign Registration Form.
8. Sign and adhere to the conditions of their Tuition Payment Form and/or Scholarship Agreement.

II. Household Information

1. Including student, how many people are there in the household?
2. Including student, how many people in the household earn an income?
3. Including student, how many people in household study at DIW this semester?
4. How many semesters (including summer) has dancer studied at DIW?
5. What contribution will your household make towards the student's tuition? \$ or %

III. Other Information

Please let us know if there is information that we should know in considering the student's eligibility for a scholarship (e.g., other financial obligations, extenuating circumstances).



FOUNDATION

SCHOLARSHIP APPLICATION

I/We attest that all information on this form and the supplementary documents that we provided (i.e., proof of student residency, and proof of student's household income) is accurate.

Dancer's Signature _____

Date _____

Parent/Guardian Signature _____
(if Dancer is under the age of 18)

Date _____

FOR OFFICE USE ONLY

Income Verification: (circle one)

2004 IRS Tax Return SSI Notification Medical Record TANF Notification Other _____

Residency Verification: (circle one) School Record Medical Record

Household Income: \$ _____

Applicant's Race or Ethnic Background: (For demographic purposes only) (optional) (circle one)

African American Asian Caucasian Hispanic Mid-Eastern Native American Other _____

Scholarship Award: (circle one) None Artistic Need

Dollar value \$ _____ Percentage % _____ Term Fall Summer Both

Decision Date: _____

Scholarship Committee Member Signature _____

Additional Comments:

Mail to DDCF, P.O. Box 23313, Alexandria, VA 22304, or Fax 703-212-8955.

For questions, contact Kimberly James at 703-866-5673