



Application submitted for (check one):

*\*Financial assistance is applicable to the session in which it is awarded. You must complete a new form each session.*

- Full Year Session 20-21
- Spring Session 20-21
- Summer Session 20-21

Deadline: August 11, 2020 by no later than 5:00 pm

Deadline: December 11, 2020 by no later than 5:00 pm

Deadline: May 11, 2021 by no later than 5:00 pm

Scholarships are available for students enrolled in one of the adults with disabilities classes. A limited number of scholarships are available each year. Submit a completed class registration form, this application, and **attach page 1 your most recently completed tax form 1040. Please black out all Social Security numbers.** For COVID19 related financial hardship, please attach a termination letter/reduced hours memo, or similar documentation. Dancers with outstanding tuition balances may not apply for a new scholarship until the balance due is paid in full. *Answer all questions in the space provided on this form; complete information is necessary for the application to be reviewed.*

**STUDENT INFORMATION**

New Student

Previously Registered

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

**CLASS SELECTION** \*Please attach a completed registration form.

Class Code \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_ Tuition \$ \_\_\_\_\_

**FINANCIAL AID REQUESTED**

I am able to contribute the following amount towards tuition \$ \_\_\_\_\_

How much Financial Aid requested? \$ \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Name #1 \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_ Work \_\_\_\_\_ Phone \_\_\_\_\_

How long have you been employed at current employer? \_\_\_\_\_

Name #2 \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_ Work \_\_\_\_\_ Phone \_\_\_\_\_

How long have you been employed at current employer? \_\_\_\_\_

**Which parent has financial responsibility?**     Name #1     Name #2     Both

**Student lives with?**     Name #1     Name #2     Both     Other \_\_\_\_\_

**INCOME & EXPENSE** (Please attach a copy of your most recent IRS tax form 1040, page 1, or a signed IRS Form 4506)

Annual total gross income for household \$ \_\_\_\_\_  
\*\* Include all sources of income including public assistance, child support, housing, etc.

Estimated monthly bills including housing \$ \_\_\_\_\_

Number of people supported by this income # \_\_\_\_\_

Include the name, age, date of birth, and relationship of all dependents

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Why are you requesting this scholarship? Please include an explanation of any extenuating circumstances you may have.**

**ALL APPLICANTS**

- Applicants may apply for one class per session.
- Financial assistance is applicable to the session in which it is awarded. You must complete a new form each session.
- Scholarships are applied to tuition only. No other discounts apply. Dancers are responsible for any other costs accrued.
- Dancers with outstanding tuition balances may not apply for a new scholarship until the balance due is paid in full.
- Dancers must attend class on a regular basis to remain eligible for the scholarship program.

*Everything that I have stated in this application is correct to the best of my knowledge. I agree to submit all necessary paperwork, to follow all guidelines, and meet all requirements of the scholarship.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Have you:  Completed the entire application  Included tax return form or signed Form 4506  Attach completed registration form

**Please return your completed application & forms to the Tanner Dance Program:**

BY EMAIL (**preferred**) to [tannerdance@utah.edu](mailto:tannerdance@utah.edu)  
BY MAIL to 1721 Campus Center Drive, Salt Lake City, UT 84112

**FOR OFFICE USE ONLY**

Date Received \_\_\_\_\_ Date Processed \_\_\_\_\_ Date Notified \_\_\_\_\_

Tanner Dance pays \$ \_\_\_\_\_ Applicant pays \$ \_\_\_\_\_

Applicant  Accepts  Declines

Authorized Signature \_\_\_\_\_