



38660 Mentor Avenue
Willoughby, Ohio 44094-7797
www.fineartsassociation.org

Minority Scholarship Application

Date _____ Session: Fall (by Aug 3) Spring (by Dec. 8) Summer (by May 10)

Curriculum: Visual Arts Music Theatre Dance

Student's Name _____ Birth Date _____

Address _____ Phone _____
Street City Zip

Parent/Guardian _____ Employer _____

Address (if different from student) _____

Grade and School (if under 18) _____

Check which applies: African American Latino/Hispanic Asian Appalachian Native American Indian

	Class/Lessons Desired	Instructor	Day	Time
Fall Session	_____	_____	_____	_____
Spring Session	_____	_____	_____	_____
Summer Session	_____	_____	_____	_____

Estimated student fees at FAA _____ Other Expenses _____

Total Family Annual Income (before taxes) _____ # Dependents _____

Unusual Expenses (medical etc.) _____

Amt of aid requested _____ Ability to help financially (parents/others) _____

Student's previous experience/study in this curriculum (list class, school, instructor & date of study)

There will be occasions when our scholarship recipients (and parents/guardians if recipient is a minor) will be asked to assist us with our annual minority scholarship fund-raising event or with other volunteer services. Volunteers are vital partners who keep us a vibrant and affordable center for arts education in our community.

The Fine Arts Association has the right to corroborate my statements by requesting a copy of Page 1 of my most recent Income Tax Return.

Student's Signature Parent/Guardian's Signature