

Instructions to Families applying for Scholarships

Fill in the application completely.

- If there is information you believe is relevant to your application for which there is no space, use the reverse side.
- If you have any questions about the application, call the Chairman of Scholarship Committee: (Laurie Niles, 626-793-6577)
- Include your most recent Federal Income Tax return. Include pages 1 and 2, and any schedules that are pertinent to your income situation.
- If your financial situation has changed (or will change) significantly from the year of the tax return, explain on the reverse side of the application.
- Mail application and tax return to Laurie Niles, 315 S. Sierra Madre Blvd., Apt. C, Pasadena, CA 91107
- Give the Teacher Recommendation Form to your teacher and ask her to mail it directly to Laurie Niles.

Scholarship Fund

CONFIDENTIAL SCHOLARSHIP APPLICATION

(use a separate application for each child)

STUDENT

Name: _____

Date of Birth: _____ School: _____ Current Grade: _____

Teacher in STEP: _____ # years in STEP: _____

PARENTS

Parent 1: _____

Address _____ City _____ Zip code _____

Phone: _____; cellphone _____ email: _____

Business or Employer _____

Position _____

Business Address _____ City _____ Zipcode _____ Phone _____

Parent 2: _____

Address (if different than parent 1) _____

Phone (if different than parent 1) _____; cell phone: _____ email _____

Business or Employer _____

Position _____

Business Address _____ City _____ Zipcode _____ Phone _____

If parents are separated or divorced, please indicate who has primary custody and financial arrangements as they relate to care and education of the children. (use reverse side if necessary.)

How many children are in the family? _____, live in the home? _____

Other relatives for whom the parents are financially responsible. _____

Do they live in the home? _____.

Is the child receiving financial aid for school attendance? _____ Percentage _____

Name of School _____

Financial obligations for other educational or recreational activities.

How much can you afford for private lessons: _____, group lessons: _____

(Families on scholarship are expected to pay what they can afford.)

Unusual expenses or considerations to be taken into account.(use reverse side if necessary)

Please attach most recent federal income tax forms.

(If your situation will change significantly during this year, please explain on the reverse side.)

We (I) state that the information contained herein is accurate and correct to the best of our (my) knowledge.

Signature – Parent/Guardian, Date

Signature – Parent/Guardian, Date

Student Scholarship Application
Teacher's Recommendation Form
(please print)

Date of Scholarship Application:_____.

The deadline for submission of all materials is 2 weeks from the date of this application. All materials must be postmarked on or before that date.

Submit Recommendation Form directly to:

Scholarship Committee Chairperson,

The student named below has applied to the Scholarship Committee for Scholarship for the _____ school year.

I recommend _____ for a Scholarship

Please comment on the student's work habits, attitude, character, interest, parent participation and any other pertinent information.

Teacher's Name (please print):_____

Teacher's Signature:_____

Street Address:_____ City:_____ State:_____ Zip_____

Telephone:_____ email:_____