

Manatee Performing Arts Center Student Scholarship Application

Submit completed form to: 502 Third Avenue West, Bradenton, FL 34205 or email to ceo@ManateePerformingArtsCenter.com

Applicant Information

Please print clearly.

Student's Name: _____ Date of Birth: _____
Last First M.I. mm/dd/yyyy

Mailing Address: _____
Street Apartment/Unit #
City State ZIP Code

Phone: _____ Email: _____

Name of School: _____ Current Grade: _____

Parent(s) or Legal Guardian(s): _____

Scholarship Information

Scholarship Amount Requested (minus \$50 deposit): \$ _____

Name of Camp/Program: _____

Reason you are requesting a scholarship and how it will help your family financially: _____

If only a partial scholarship is available, will student still attend? YES ☐ NO ☐

Referred by: _____

Relationship to student: _____

Student must also submit a brief letter stating why they want to attend.

Student must also submit a letter of recommendation from a teacher.

Signature

The information provided in this application is, to the best of my knowledge, true and complete, and I understand that false statements on this application will disqualify the applicant from the scholarship.

Name of Parent or Guardian: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

The Florida Cultural Group, Inc. does not discriminate against any person on the basis of race, color, national origin, disability or age in admission or participation in its program activities, or in employment.