

# 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 which is required to apply): \$ \_\_\_\_\_

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: \_\_\_\_\_

**Incomplete applications will not be processed. 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.*