



Scholarship Application

Date Received: _____ Audition Number _____

Welcome to Scottsdale Ballet Foundation’s audition application process and thank you for your interest in this program. Please complete the following information and return this form on the day of your audition. You will be notified by email or US mail within 2 weeks following the audition. Please note that limited scholarships are available and many factors are considered when determining the recipients. You will also need to complete and sign the Injury Waiver form and if under 18, this must be signed by a parent or guardian.

Please Print Neatly:

Name: _____

Parent/Guardian Name: _____

Address: _____

City: _____ Zip: _____

Phone Number: _____ E-mail: _____

Age: _____ Birthdate: _____ M/F: _____

Name of your current dance school: _____

of years of ballet studied: _____ Current #of ballet classes per week: _____

Previous ballet schools and instructors: _____

How did you hear about the Scottsdale Ballet Foundation Scholarship?

What out of state ballet program will you be attending this summer?

Audition requirements:

- Be attending SSB or an out of state 2017 Summer Ballet Intensive Program
- Have had a minimum of 4 years ballet with 2 years pointe
- Be between the ages of 13-18
- Pay the \$25.00 Audition Fee

Come to audition with hair in a neat bun, leotard, tights, ballet slippers and pointe shoes
Please number your preferences 1-3:

- ___ Use all award money for SSB Summer Program
- ___ Use award money between SSB Summer Program and out of state program
- ___ Use all award money for out of state program