



# Scholarship Application Form

## General Information

The Chance Theater offers full and partial scholarships to qualifying students for tuition for all of our educational programs. Funds are limited and based on financial need. The balance remaining from partial awards must be paid by the first day of the session. Should you require further assistance, please call our office to speak with Tanae Beyer, Education Director, at (714) 777-3033.

**This application is for:**

- Full Scholarship
- Partial Scholarship

## Application Process

- Parent/Legal Guardian complete Part 1 of the application.
- On a separate sheet of paper, please provide a description of your need for financial assistance.
- Please provide a copy of your most recent paycheck stub or W-2 for income verification.
- Student must complete the student questionnaire on the next page.
- Mail forms and income verification to:

The Chance Theater  
 Attn: Scholarships  
 PO Box 3309  
 Orange, CA 92857

**All information on this form is confidential.**

**Application Deadline:** One month before start of education program.

**The application review process takes about one week. After that time, you will be notified of our decision.**

## Part 1: Financial Information

Parent or Legal Guardian: \_\_\_\_\_

Daytime Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Evening Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Which program is your child participating in? \_\_\_\_\_

1. Do you receive governmental aid? (i.e. Welfare, Medi-Cal, SDI, AFDC, SSI or SSA) YES NO

2. How many family members are living in your household? \_\_\_\_\_

3. What is your total household annual income? \_\_\_\_\_

4. Where are you employed? \_\_\_\_\_

5. Are you a single parent? YES NO

6. If YES, do you receive child support? YES NO 6a. If YES, how much per month? \_\_\_\_\_

7. Have you ever received a scholarship from the Chance Theater before? YES NO

8. If YES, when did you receive it and for how much? \_\_\_\_\_

I certify that the information provided in this form is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

