

CCSF Scholarship 2019: Course/Program Information Form

(To be completed by the student, parent, or sponsoring organization)

Please include this form with the student scholarship application, which must be postmarked by Friday, March 15, 2019 to receive consideration for a scholarship.

Student Name:

Last

First

Middle

The Cab Calloway student named above is applying for an arts scholarship. Scholarships are awarded to complete specific, arts-related instruction in the performing, visual, or communication arts, specifically in the summer while school is not in session. Awards pay for tuition, cost of lessons, and if provided as part of a residency program, for room and board. Transportation to and from the program is not eligible for award. To assess financial need, we ask the applicant to itemize the expected costs associated with completing their chosen program. Attach any additional materials to support your selection of this program and justify costs (i.e., rate sheets, registration form, etc).

Describe the course/program/lessons offered to this applicant:

Program Start Date: _____ Program End Date: _____

How often does the program meet: _____

Student Status (*Circle One*):

Admitted to Program

Under Consideration

Expressed Interest

The Cab Calloway School Fund Scholarship Program awards payment upon acceptance to the program, or on a periodic basis, directly to the program provider, on receipt of an invoice or bill. We will send a commitment letter in advance if this applicant is awarded funds from our scholarship program.

Course/Program Name _____

Person/Institution offering program: _____

Address: _____

City: _____ State: _____ Zip: _____

Program Contact Person: _____

Title: _____

Phone: _____

E-Mail: _____

CCSF Scholarship Worksheet

Please complete all relevant costs below. If a cost does not apply to your program, please note N/A. Awards are limited to \$1,000 maximum.

Program Costs

Tuition _____ (Enclose copy of fee schedule provided by sponsoring organization)

Private Lessons _____ (Rate per hour: _____ ; Total hours: _____)

Room & Board _____ (Enclose information from program)

Other _____ (Specify: _____)

Total Program Cost _____ **(A)**

Contributions

Parents/Guardian _____

Financial Aid _____

Student _____

Other Resources _____

Total Contribution _____ **(B)**

Amount Needed _____ **(A minus B)**

Use this section to itemize or explain figures listed above. Enclose copies of available price information. Also indicate what comparison/price shopping was conducted to make this program choice.
