



## WORK STUDY 2011-2012

Due Date August 20, 2011

Name of Student (s): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ School grade in September: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

Dance Experience: \_\_\_\_\_

**Parent/Guardian 1's Name:** \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer (Name, Phone, Position): \_\_\_\_\_

**Parent/Guardian 2's Name:** \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer (Name, Phone, Position): \_\_\_\_\_

Other dependent children:

Name of child	Age	School/College	Tuition Amount paid by Parents	Amount of Aid Received by Parents
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Explain any special family circumstances such as divorce, unemployment, illness, etc.:

\_\_\_\_\_  
\_\_\_\_\_

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The Dance Institute welcomes any further statement you may wish to make which may aid in determining the amount of y qtmw{ 'that is appropriate for the school to grant. Use additional paper if necessary.

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Application for:

Work Study for Parent/when available

**Please attach a copy of your latest income tax return.  
Deadline for applications: Friday August 20, 2011  
Applications will not be processed without tax information or if  
received after the deadline.**

Parent/Guardian's Signature \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Date \_\_\_\_\_