

ONE WORLD STAGE & SCREEN  
Scholarship – Financial Aid Grant Application

STUDENT INFORMATION

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_

APPLICANT INFORMATION (Parent/Guardian/Adult Completing Application)

Applicant Name: \_\_\_\_\_

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

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

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

Relationship To Student: \_\_\_\_\_

FAMILY INFORMATION

List the names of all family members claimed on your tax return who are living in your home, along with the DOB and grade (if applicable) for each child/dependent on the list (attach additional sheets if necessary).

Name	Relationship To You	Birthdate	Grade
	<i>Person completing application.</i>		

FINANCIAL

Estimated Family Annual Income: \_\_\_\_\_

Briefly explain the circumstances which indicate your need for financial assistance (attach additional sheets if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare that I have examined the information in this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature Of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_