

Ballet Arts Academy 1620
Rodgers St, Suite 3
Missoula MT 59802
Phone: (406) 549-3081

Confidential Request for Financial Aid

Due September 15, 2023

Please return this form in a sealed envelope, addressed to:

BAA Scholarship Coordinator

****mail to the BAA address or drop off at the studio***

Philosophy: Ballet Arts Academy believes all children deserve the opportunity to receive an education in dance. Following this philosophy, students and parents experiencing financial difficulty paying for classes at Ballet Arts Academy may apply for a need-based scholarship.

Note: The information provided on this form will be used by members of the Financial Aid Committee to determine scholarships. The BAA Financial Aid committee will hold all information confidential, including the identification of the students receiving financial aid. However, in order to conduct our business, the Financial Aid Committee may need to share student names with BAA's Treasurer, bookkeepers, and other financial consultants.

Name of financially responsible parent(s) or guardian(s):

Home Phone:

Street Address:

City, Zip:

E-mail:

Cell phone:

Student #1:

Please list name, day, and time of classes enrolled in:

Student #2:

Please list name, day, and time of classes enrolled in:

Student #3:

Please list name, day, and time of classes enrolled in:

Student #4:

Please list name, day, and time of classes enrolled in:

FOR BAA USE ONLY

Monthly Tuition:

Amount requestor can pay each month :

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Financial Information

Instructions: Provide your best estimate of income and expenses during the previous calendar year. **Please also include a copy of your income tax form from the previous year (2022) – This is a requirement for being considered for a scholarship.**

Estimated Annual Income:

Salary/Wages: _____
Investments: _____
Child Support: _____
Bank Account: _____
Investments: _____
Real Estate owned: _____
Other (describe): _____
Other (describe): _____
Other (describe): _____

Total Income: _____

Estimated Annual Expenses:

Mortgage/Rent: _____
Taxes: _____
Utilities: _____
Credit Cards and loans (total): _____ Food: _____

Clothing: _____
Medical and Insurance: _____
Other (describe): _____
Other (describe): _____
Other (describe): _____
Other (describe): _____

Total Expenses: _____

Income less Expenses: _____

We would like you to contribute a portion of the monthly tuition.

How much of the monthly tuition can you pay? _____

Will you need financial aid for the costs associated with the recital in the spring? _____

Is there any other information you would like to provide to assist us with our decision?

I, the below signed Requestor, hereby certify that the amounts listed herein are a true and correct statement of my income and expenses. I agree to report any significant changes to my financial situation to my BAA Liaison within 7 days of that change.

Signature of Requestor: _____ **Date:** _____

Requestor will be notified concerning scholarship award no later than 1 month from date received. Until such time, full financial commitment is necessary.