



Winchester Christian Ballet Scholarship Application

Winchester Christian Ballet believes that no student should be precluded from dance because of financial constraints. Winchester Christian Ballet offers a scholarship program to help families offset costs. The studio has a limited number of scholarship funds available and the number of dancers receiving aid and the amount of the scholarship will vary depending on the funds available. Scholarships are funded by annual fund raising and donations.

Scholarships are granted on a semester basis. Scholarships only cover a portion of dance studio fees and families will be responsible for paying fees not covered by the scholarship. Families are also responsible for their dancer's uniform/accessories, as outlined per class on the website, as well as registration and performance fees.

Application Instructions

1. In order to be considered for a scholarship, applicants must complete all the information on the following pages, even if you have applied before. If any information is incorrect or missing, the application will NOT be considered.
2. No application will be considered if the dancer has unpaid fees from a prior season.
3. A separate application form must be submitted for each dancer requesting financial assistance.
4. Submit all application materials by mail:
Winchester Christian Ballet
5 N Bloomfield Rd.
Winchester, KY 40391

Or by email: winchesterchristianballet@gmail.com

Or fill out the online form: (insert link here)
5. Application Deadline: **July 18, 2025**
Applications that are not received by this deadline will not be considered.

Scholarships are awarded based upon demonstrated need. Applications will be reviewed by the WCB Board and administration. All information will be kept confidential.

Important:

Dance involves both financial and time commitments from both dancers and parents/guardians. Scholarship students will be expected to have excellent attendance records. To view our class schedule and academic calendar, please visit our website. If you have questions about these commitments, please email winchesterchristianballet@gmail.com.

GUARDIAN INFORMATION

Parent/Legal Guardian's Name

Email

Phone Number

Address

Residing County

STUDENT INFORMATION

Student Name

Student's DOB

Student Phone (if applicable)

Student Email (if applicable)

FINANCIAL INFORMATION

All Winchester Christian Ballet scholarships consider the financial needs of those applying. To verify your income please attach:

- 2024 Tax returns
- Your last two pay stubs
- Narrative of Financial Context
 - Share more personally about your current need. If there has been a major life change or extenuating circumstance, please record it on the next page. If you need more space, please upload additional documents as needed

All documentation is stored securely.

Narrative of Financial Context

Please initial below to accept the following statement:

_____ I understand that if I do not attach required financial forms my application will be incomplete and remain unprocessed.

DANCER/PARENT AGREEMENT (Initial next to each statement below and sign/date as indicated):

I attest that all of the application information is true and accurate to the best of my knowledge. I understand all scholarship students are expected to be prepared, prompt, in regular attendance, and maintain class etiquette. If this application is accepted, I will certify that we will abide by all of the policies and procedures of Winchester Christian Ballet.

_____ I understand that I am responsible for paying studio fees not covered by the scholarship: registration fee, performance fees, dance uniform/accessories, competition fees, etc.

_____ Commitment to dance for Winchester Christian Ballet is on a semester basis

_____ Parents/guardians along with the dancer will actively participate in future studio fundraisers

_____ Dancer must be committed to attending the scheduled classes they register for

_____ I will notify the WCB Board if my financial situation changes during semester

_____ Failure to meet obligations can result in the suspension or termination of WCB's scholarship assistance.

Date: _____

Printed Name: _____

Signature: _____