

# BALLETNOVA FINANCIAL AID REQUEST

(CONFIDENTIAL)

Student: \_\_\_\_\_

Age: \_\_\_\_\_

Parent: \_\_\_\_\_

# of Classes: \_\_\_\_\_

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

Level: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

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

Need-based aid is available for families who require some support. A significant level of commitment to the Center from both the student and the parent will be required. Funds are limited in this regard and every consideration will be given to the applicant. We reserve the right to discontinue aid if we find that a dancer is no longer showing interest and commitment so that we can help others in need of these restricted funds.

**Please provide us a copy of your most recently completed 1040 submitted to the IRS.**

\_\_\_ My financial circumstances has changed since my last 1040

\_\_\_ My financial circumstances have not changed

Total combined family income: \_\_\_\_\_ Number of children in family \_\_\_\_\_

**Total aid requested:** \_\_\_\_\_

Families (or students) that receive Financial Aid from BalletNova are required to volunteer a minimum of 20 hours per year (or 10 hours per semester). This could include helping at special events, performances, festivals, classes and other opportunities to help BalletNova. Students are also expected to fully commit to their training at the studio and be exemplary representatives of Ballet Nova outside the studio.

**Applicable Skills for volunteering:** \_\_\_\_\_

Signature (Student): \_\_\_\_\_

Date: \_\_\_\_\_

Signature (Parent): \_\_\_\_\_

Date: \_\_\_\_\_

**Office Use**

Need:

Award:

Initials:

Date:

Thank you for your interest. Please submit to Nancie Woods, Artistic Director;  
BalletNova Center for Dance; 3443 Carlin Springs Rd., Falls Church, VA 22041