

Application



Date: _____

Name of Dancer: _____

Address: _____

Street

City

Province

Postal Code

Phone Number(s) Home: _____ Cell: _____

D.O.B.: _____ Age: _____ Parent/Guardian: _____

Check the program you are applying for: Recreational <input type="radio"/> Pre-Professional/Competitive <input type="radio"/> Full Scholarship <input type="radio"/> Partial Scholarship <input type="radio"/> Dance Wear Required <input type="radio"/> Total Number of Classes <input type="radio"/>

Is this the 1st time the applicant will be participating in dance class:

If 'NO' How many years:

Program Start Date: _____

Will you be receiving funding from any other source at this time: Yes No

If Yes: please indicate where this funding will come from & the amount: _____

If you are applying for scholarship please tell us about your dance history: please use the back of the form if necessary (eg. years dancing, dance disciplines, why you love dance etc.)

Application deadline: September 1st
 Summer programs are not considered

Comments:

Parents/Guardian Name (please print)

Parents/Guardian Signature

Funding is awarded at the sole discretion of The Chance 2 Dance Foundation

Family Financial Needs Assessment



Dance Year:

Section A

Dancer Name: _____ Age: _____
Last Name First Name

Parent Name: _____ Co-Parent: _____

Single

2 Parent Family

If Single or not living with the co-parent of the applicant, please complete Section D (this section must be completed for the application to be considered - please do not X it out)

Section B

Address: _____

Home Phone: _____ Cell Phone: _____ Postal Code _____

E-Mail: _____ (Please print, we will contact you through e-mail)

Section C

Employment Status Please list Employer: Parent #1 Parent #2

Parents	Employed	Retired	E.I.	Disability	Other
Net Salary (parent #1)	\$	\$	\$	\$	\$
Net Salary (parent #2)	\$	\$	\$	\$	\$

Total Employment Income (taken from chart above, net salaries)

Monthly Child Support Payments Received

Other Income (ie. investments, rental income etc.)

Housing Costs: Circle one: RENT OWN

Monthly Child Support Payments Paid Out

Other Expenses: Please list

Total Monthly Expenses

Total Monthly Income

of Children (0-18) in the household _____

Ages: _____

Family Financial Needs Assessment



Dance Year:

Section D

Dancer Name: _____ Age: _____
Last Name First Name

Co-Parent : _____ (non-custodial parent, joint custody etc.)

Address: _____

Postal Code

Home Phone: _____ Cell Phone: _____

E-Mail: _____ (Please print, we will contact you through e-mail)

Employment Status Please list Employer: _____

Parents	Employed	Retired	E.I.	Disability	Other
Net Salary (parent #1)	\$	\$	\$	\$	\$

Total Employment Income (taken from chart above, net salaries)

Monthly Child Support Payments Received

Other Income (ie. investments, rental income etc.)

Housing Costs: Circle one: RENT OWN

Monthly Child Support Payments Paid Out

Other Expenses: Please list

Total Monthly Expenses

Total Monthly Income

of Children (0-18) in the household _____

Ages: _____

Signature co-parent

Dance Studio Information

To Be Completed by Studio Director or Representative



Date: _____

Person Responsible for Completing this form: _____
please print

Name of Dancer Applying for Assistance: _____
please print

Studio Name or Organization: _____

Address: _____

Web Site: _____

Phone: (Studio) _____ Cell: _____

E-Mail: (Studio) _____ (Other) _____

If applicant is applying for a scholarship please complete the section on Exams

Does your studio run exams: Yes No

If Yes: Which Syllabus Does the studio follow: _____

Exams are held in: Jazz Tap Ballet Acro

Last Exam taken by the applicant: _____
please include exam level & date taken

How Often Do You Run Exams: _____

Total Number of Classes Tuition Costs: Choreography Costs:

Entry Fee Costs: Costume Costs: Travel Costs:

Other Costs: Yearly Cost of the Program:

The studio understands that awards for recreational and scholarship dancers may be made twice a year (Fall & Winter. Please refer to Dance Studio Information.

I certify the information listed above is a true estimate of costs for the _____ dance year.

Studio Director Name (please print)

Studio Director Signature

Applying To The Chance 2 Dance Foundation

Application Deadline for Sept. 1st.

The Chance 2 Dance Foundation is a Canadian non-profit charity. The mission of this foundation is to provide dance classes to all children. The Chance 2 Dance works with other charity organizations, providing after school programs for children at risk, or providing a dance class for children with financial barriers. The Foundation also awards partial & full scholarships for competitive/pre-professional dancers.

Dancers may attend any Canadian Dance School for recreational classes and a Certified Dance Studio (in Canada) to qualify for full or partial scholarship.

1. Complete Page 1 : Application
2. Complete Sections A.B.C: Page 2: Please have all sections completed
3. Non-Custodial parents must complete Section D - Page 3 (failure to complete the Needs Assessment with result in the application not being processed)
4. Take Page 4 to the dance studio and ask them to complete this section The studio will complete the costs for the required classes.
5. Submit to The Chance 2 Dance Foundation: 74 Jamie Avenue, Nepean, Ont. K2E 6T6 or scan and e-mail to info@thechance2dance.com.
6. Once the application and financial needs assessment is received, a decision will be made by Sept. 15th
7. A notice of status will be mailed or e-mailed to the applicant.

All Decisions are final

Sponsorship is limited by the number of donations received