



**SUMMER SESSION 2008
SCHOLARSHIP APPLICATION FORM
DEADLINE FOR SUBMISSION 6/7/08**

STUDENT'S NAME: _____

PARENT / GUARDIAN NAME: _____

ADDRESS: _____

PHONE (HOME): _____

PARENT CELL: _____ STUDENT CELL: _____

PARENT EMAIL _____ STUDENT EMAIL: _____

TO BE FILLED OUT BY STUDENT:

PLEASE LIST ANY PREVIOUS "PERFORMANCE RELATED" EXPERIENCE YOU HAVE (LESSONS, SCHOOL PRODUCTIONS OR COURSES, CHURCH ACTIVITIES ETC)

PLEASE TELL US WHY YOU WOULD LIKE TO PARTICIPATE IN THE YOUNG PERFORMERS INSTITUTE THIS SUMMER

TO BE FILLED OUT BY PARENTS:

PLEASE TELL US WHY YOU BELIEVE IT IS IMPORTANT FOR YOUR CHILD TO PARTICIPATE IN THE YOUNG PERFORMERS INSTITUTE THIS SUMMER

WILL LACK OF SCHOLARSHIP FUNDING PREVENT YOUR CHILD FROM PARTICIPATING IN THE YOUNG PERFORMERS INSTITUTE THIS SUMMER? (please circle one)

YES

NO

DO YOU QUALIFY FOR FEDERAL FREE OR REDUCED LUNCH? (please circle one)

FREE

REDUCED

NO

I certify that the above information we have provided are true statements to the best of our knowledge.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

TO SUBMIT

Mail to: Covina Center for the Performing Arts, Attention Education Department
126 East Badillo Avenue #104, Covina, CA 91723

Fax to: (626) 331-8433, Attention Phil Miller, Education Director

For Additional Information Please Contact

Phil Miller, Education Director
626)331-8133 ext. 812
pmiller@covinacenter.com