

Dear Applicant,

Students are chosen to receive summer camp scholarships based on several criteria, such as extent of financial need and the degree to which they may benefit from the lessons. Perform 4 Purpose is committed to offering music education and performance opportunities to all students on an equal basis regardless of race, color, creed, national origin, religion, gender, sexual orientation, or disability. The following is the application required for a student to be considered to receive a scholarship for a summer camp. The scholarship will include coverage of the fee for participation in the summer camp. If you are applying for a scholarship for a Perform 4 Purpose Summer Camp, appropriate materials will also be provided.

Please complete the following application to the fullest extent. Your application will be viewed by the Perform 4 Purpose Board of Directors at the next meeting following the submission of your application. A decision will be made, and you will be notified following the meeting. If your case is time sensitive and requires immediate action, please contact our Program Director, Jim Van Arsdale (contact information provided below), to arrange an expedited application process. We thank you for your support of Perform 4 Purpose, and we look forward to working with you. If you have any further questions or concerns, please feel free to contact programs@perform4purpose.org.

Sincerely,

Jennifer Van Arsdale President Perform 4 Purpose (315) 289-8814 jen@perform4purpose.org www.perform4purpose.org Jim Van Arsdale Program Director Perform 4 Purpose (315) 289-8827 programs@perform4purpose.org www.perform4purpose.org

-	PERFORM 4 PURPOSE
	Helping the community one performance at a time

Student's Contact Information:			
Name of Student:			
Address:			
City:	State:	Zip Code:	
School:			
City:	State:	Zip Code:	
Phone Number:			
Parent/Guardian's Contact Informa	tion:		
Name:			
(If different from student):			
Address:			
City:	State:	Zip Code:	
Phone Number:			
Recommender's Contact Informatio	on:		
Name:			
Address:			
City:			

-	PERFORM 4 PURPOSE
_	Helping the community one performance at a time

Phone Number:

Relationship to Student:

Summer Camp Information:

Which summer camp would you like to recommend this student for?

Please describe why you think the student will benefit from the summer camp:

How did you hear about Perform 4 Purpose Summer Camp Scholarships?



Applicant's Signature:

Date: _____

Please return completed application to:

Perform 4 Purpose 8 Fourth Ave. Auburn, New York 13021

OR

Jim Van Arsdale Program Director Perform 4 Purpose (315) 289-8827 programs@perform4purpose.org

OR

For Perform 4 Purpose Summer Camps Only:

Chris Little Summer Camp Director Perform 4 Purpose chris@perform4purpose.org

Please direct any questions or concerns to:

Jim Van Arsdale Program Director Perform 4 Purpose programs@perform4purpose.org (315) 289-8827