



# School of Fine Arts

AT HOUSTON'S FIRST

## *Scholarship Application*

### FOR OFFICE USE

Applicant Name: \_\_\_\_\_

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

Scholarship Awarded: \_\_\_\_\_

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



*The School of Fine Arts at Houston's First Baptist Church exists to equip people to Glorify God through the arts.*

The School of Fine Arts, at Houston's First, offers need-based scholarships. These scholarships are granted at the discretion of the School Director as a reward for excellence and as an encouragement of potential. Scholarships are partially based on the student's work ethic and commitment to training as well as the family's financial need. We look closely at student behavior and parental support with regard to attendance and adherence to SoFA policies when gauging new or re-issuance of scholarships.

Because we understand that the desire for assistance will be great, we take the giving of scholarships very seriously and look to be good stewards of the money that will be provided. Scholarship students and parents are under specific guidelines to act as ambassadors for SoFA. There is an expectation that scholarship students/parents would be willing to volunteer their time when needed, would not have excessive absences, would show a commitment to practice and maintain a positive attitude in order to keep their scholarship. Scholarships can be reduced or revoked at anytime if these expectations are not met.

Scholarship recipients must re-apply each year and will be re-evaluated to determine future scholarship.

Upon receipt of your application and review by the Scholarship Committee, you will be notified of the committee's decision in a timely manner. If you are awarded a scholarship, you will be asked to sign a commitment form.



Your interest in The School of Fine Arts at Houston's First Baptist Church is appreciated. We invite you to fill out this application and return it to the Music Office. The Scholarship Committee will thoroughly consider your need for scholarship help and contact you soon.

## I. Personal Information

Full Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Best Time to Contact You: ☐ Daytime ☐ Evening

## II.

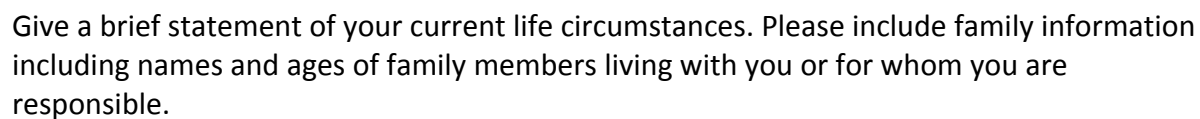
Please indicate the lessons for which you need scholarship help:

First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

How much can you contribute toward the monthly tuition?

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