

**Bandstanders**  
**Spirit of St Louis Marching Band**  
**Scholarship Application – Tournament of Roses Parade – January 2011**

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**Scholarship Request Number** \_\_\_\_\_ *(assigned by committee)*

Band Member Name \_\_\_\_\_ Grade Level 2010-2011 School Year \_\_\_\_\_

Instrument/Color Guard \_\_\_\_\_ Years in Band (include Sperrang and LHS) \_\_\_\_\_

Street Address: \_\_\_\_\_ Other schools years in band \_\_\_\_\_

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

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

Parent/Guardian Names: \_\_\_\_\_

**General Information:** Need- based scholarship funds are not guaranteed but are anticipated to be available from donors. Scholarships are expected to be limited to no more than \$1,450 (approximately 80% of the anticipated trip cost). Each band member should provide a minimum of \$400 (approximately 20% of the trip cost). Scholarships are intended for actual travel and directly related costs. Scholarships are not transferable, non-refundable and have no cash value. The actual number of scholarships awarded and allocation amounts will be limited to funds available.

**Applications must be submitted no later than July 30, 2010. Drop in green mailbox in the LHS Band room, in envelope marked CONFIDENTIAL – SCHOLARSHIP APPLICATION.**

**All information in this application will be treated as confidential and made known only to the scholarship committee.**

**Instructions**

Scholarship request: List the amount requested, including costs provided by band member. Please assess and include funds needed, rather than simply asking for full cost.

Family Information: Briefly describe the general circumstances that require scholarship assistance for the band member to attend the Tournament of Roses Parade.

In keeping with the policies of Bandstanders, the rules for acceptance and participation are the same for everyone without regard to race, sex, creed, color, national origin, age or physical limitation.

**Information contained within this application is complete and accurate:**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Scholarship Request Number \_\_\_\_\_ (assigned by committee)**

**SCHOLARSHIP REQUEST:**

Cost of Trip:	\$__1, 850__
Less: Cost provide by band member family	\$_____
Less: Student Account funds to date	\$_____
Net Scholarship Request	\$_____

*Continue on back of form if necessary for questions below.*

Explain what the band member has done to earn a portion of his/her trip fees: (Include general and individual fundraising activities)\_\_\_\_\_

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If band member is not participating in fundraising activities, please explain why:

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**FAMILY INFORMATION:**

Describe the circumstances that require scholarship assistance for the band member to attend the trip:

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Total Annual Household Income \$\_\_\_\_\_

Ages of other children in the home (if over 18, is child attending college)?

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