



REQUIRED ATTACHMENTS *(check one):*

YES, I was required to file taxes in 2017 or 2018 and have attached pages 1-2 of my most recent Form 1040 US Individual Tax Return

NO, I was not required to file taxes. I have attached a recent paystub and/or verification of public assistance. *(Please see page 3 of this form.)*

Student # 1 - Applicant Information

Name: _____ School: _____

Age: _____ Current Grade: _____

Student # 2 - Applicant Information *(leave blank if not applicable)*

Name: _____ School: _____

Age: _____ Current Grade: _____

Student # 3 - Applicant Information *(leave blank if not applicable)*

Name: _____ School: _____

Age: _____ Current Grade: _____

Parent/Guardian A Information

Name: _____ Email: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Parent/Guardian B Information

Name: _____ Email: _____

Address: *(check one)* Same as Above Different from Above Unknown

How many people live in your household? _____ (# dependents) _____ (# adults)

Who is the Applicant’s custodial parent?

__ Parent/Guardian A __ Parent/Guardian B __ Both __ Not Applicable

Who is able to contribute to the Applicant’s tuition?

__ Parent/Guardian A __ Parent/Guardian B __ Both __ Not Applicable

Program Information

Which studio would the student like to attend? __ H Street __ Bethesda __ Friendship Heights

Has the student been accepted into the Dance Institute and/or a Youth Performance Company?

YES, accepted into _____ (program name) __ N/A

Financial Information

Parent/Guardian A

Please estimate your income for **this school year + summer** (September 2018 – August 2019):

Employer: _____ Dates of Employment: _____ to _____

Estimated Total Wages/Compensation for Sept. 2018 – Aug. 2019: _____

Parent/Guardian B

Employer: _____ Dates of Employment: _____ to _____

Estimated Total Wages/Compensation for Sept. 2018 – Aug. 2019: _____

Do you have additional sources of income or support? (please list in the space below)

Are you eligible for and/or receive any of the following? (please list amounts)

Social Security: \$ _____/month Unemployment: \$ _____/month

TANF: \$ _____/month Child Support: \$ _____/month

SNAP: \$ _____/month

Please email a complete application the address below. Please do **not** bring applications to the studios. *We cannot accept them there without advanced notice.*

If you have questions about or would like some assistance with the application, please feel free to get in touch with us! We are glad to help.

financialaid@joyofmotion.org

202-907-5113 (direct line)

Application Policies

- Full and partial assistance may be awarded and decisions are based on financial need and availability of funding.
- Applicants only need to reapply once annually (before the new school year).
- All financial and personal documents are considered private and confidential.
- Joy of Motion may quote from the student’s essay and identifying information will be removed in that case. *Please make a note below if you do not wish to allow this.*
- If partial assistance is awarded, the parent or guardian can either pay the balance in full before the first class or set up a payment plan.
- Should financial aid be declined, applicants are still eligible for payment plans.

- *Note:* Please submit **all** required documents. A completed application also does not guarantee that financial aid will be provided.

I have reviewed and understand these policies.

Signature

Date