



Training dancers since 1983

The Woodbridge School of Dance (WSD) Scholarship Application Form

PLEASE PRINT

NAME _____

HOME PHONE _____

EMAIL _____

BIRTHDATE _____

CURRENT AGE _____

NAME OF HIGH SCHOOL: _____

SCHOOL ADDRESS: _____ SCHOOL PHONE: _____

CITY: _____

POSTAL CODE: _____

Are you currently completing your final year at WSD?

YES NO

Have you ever been a Teaching Assistant at WSD?

YES NO

CAREER/OCCUPATIONAL INTERESTS

List up to three careers or occupations you are considering, in order of preference:

- 1. _____
- 2. _____
- 3. _____

EDUCATIONAL INTENTIONS AFTER HIGH SCHOOL

- UNIVERSITY COLLEGE ACADEMY/INSTITUTION

Name of educational institution you plan to attend:

Anticipated course of study and degree/diploma sought:

Anticipated start date:

EXTRACURRICULAR ACTIVITIES (other than dance)

List extracurricular activities in which you have participated and specify the nature of your involvement in each.

ACTIVITY	ROLE	DATES
1. _____		
2. _____		
3. _____		

WORK/VOLUNTEER EXPERIENCE

List summer or part-time jobs you have held, if any, specifying employer, type of work and length of time in position. Indicate (S) for summer jobs and (Y) for school year.

EMPLOYER	TYPE OF WORK	YEAR(S)
1. _____		
2. _____		
3. _____		

DANCE EXPERIENCE

List any auditions, workshops, shows, TV ads etc. in which you have participated:

- 1. _____
- 2. _____
- 3. _____

OUTSTANDING DANCE COMMITMENT

Summarize briefly in your 500-word typewritten essay, the nature of your dance commitment on which this application is based. List at least one organization(s) and/or individual(s) whose letter(s) of support or confirmation regarding the above dance involvement is enclosed with this application. (WSD Faculty excluded).

- 1. _____
- 2. _____
- 3. _____

ACKNOWLEDGEMENT AND AUTHORIZATION

I confirm the information submitted with this application will be used to assess my eligibility for the WSD Scholarship. I certify that all the information provided on this application form and all supporting documents are true.

SIGNATURE: _____ DATE: _____