

# Art and Culture Center of Hollywood

## 2014 Hallandale Scholarship Application Request

*Please fill out and return along with a completed registration form and proof of eligibility. Please fill out a separate form per child.*

Parent/Guardian Name \_\_\_\_\_

Full Address \_\_\_\_\_

Best Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Program Requested \_\_\_\_\_

Birth Date and Age of Youth \_\_\_\_\_

Will your child need transportation to and from camp? (Circle one)      **YES**                      **NO**

Each **student** must complete the written portion of this application explaining why they should be awarded this scholarship and why they would like to join the program requested. Maximum of 400 words (attach additional paper or letter if necessary)

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Please attach proof of participation in Broward County or Miami-Dade free/reduced meal program or proof of income with the latest W2 form. First preference will be given to families with income at or below the following Florida Income guidelines:

Household	2	3	4	5	6
Yearly Gross Income	\$28,694	\$36,131	\$43,568	\$51,005	\$58,442