



Summer Camp Scholarship Application

Date of application: _____

Student name	
Date of birth	
Gender (m/f)	
Parent/guardian name	
PO Box / Post code	
Contact telephone	
Contact email	

Signed (parent/guardian): _____

Please state below your reason(s) for requesting a partial scholarship (please give as much detail as you can, and continue on a separate sheet if necessary):

For a child to be considered for a Spark! scholarship, they must be referred by a teacher, principal, pastor, or an administrative representative of an agency such as the Department of Children & Family Services, social services, foster care, etc.

Referrer Name _____ Occupation _____

Phone _____ Email _____

(Please provide a signed supporting statement attached to this form from the Referrer. Applications will not be considered without this statement.)

Information: Scholarships are offered as a partially reduced cost from our regular fees or full scholarship to students under the age of 18 who have the desire to be involved in performing arts lessons but otherwise could not afford it. Scholarship money is provided by *Spark! School of Music*, private donations, and fundraising efforts. Donations are used to pay the teachers and operating costs.

All requests are confidential and only seen by staff of Spark! School of Music.

Email all requests to janelle@sparkmusicschool.com or drop off at:

*Unit 13, Crown Square (upstairs)
Eastern Avenue
Grand Cayman*

Please allow at least 5 business days for a decision.