

**WATERTOWER THEATRE  
2009 SUMMER PERFORMING ARTS CONSERVATORY  
SCHOLARSHIP APPLICATION**

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Names and ages of other dependents living in the household

\_\_\_\_\_

\_\_\_\_\_

Financial Information

A. Monthly Expenses

Rent/House Payment \_\_\_\_\_  
 Utilities \_\_\_\_\_  
 Food \_\_\_\_\_  
 Medical (including Prescriptions) \_\_\_\_\_  
 Clothing \_\_\_\_\_  
 Cleaning/Laundry \_\_\_\_\_  
 Life/Medical Insurance \_\_\_\_\_  
 Installment Payments \_\_\_\_\_  
 Car Payments \_\_\_\_\_  
 Gas/Oil \_\_\_\_\_  
 Maintenance \_\_\_\_\_  
 Car Insurance \_\_\_\_\_  
 TOTAL \_\_\_\_\_

Child Care \_\_\_\_\_  
 Other \_\_\_\_\_

TOTAL MONTHLY EXPENSES \_\_\_\_\_

B. Monthly Resources

Net Earnings (Father) \_\_\_\_\_  
 Net Earnings (Mother) \_\_\_\_\_  
 Child Support \_\_\_\_\_  
 Social Security Benefits \_\_\_\_\_  
 AFDC (Case # \_\_\_\_\_) \_\_\_\_\_  
 Other (Specify) \_\_\_\_\_

TOTAL \_\_\_\_\_

TOTAL MONTHLY RESOURCES \_\_\_\_\_

Does your child receive:    free lunch        reduced lunch        neither

For Theatre Use Only

Please send completed form to:

WaterTower Theatre  
 Attn: Landrie Bock                      or fax to 972-450-6244  
 15650 Addison Road  
 Addison, TX 75001

Date Received \_\_\_\_\_  
 Reviewed by \_\_\_\_\_ Date \_\_\_\_\_  
 Action Taken \_\_\_\_\_ Date \_\_\_\_\_  
 Scholarship Awarded \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_

**All information contained in this application will be kept confidential.**