



Zzak G. Applaud Our Kids Foundation, Inc.

The mission of the Zzak G. Applaud Our Kids Foundation, Inc., a 501(c)(3) non-profit organization is to provide the opportunity for children with a financial need to creatively express themselves by taking lessons in the various disciplines of the performing arts.

Our vision is to be a conduit between children in the community and performing arts educational centers in order to provide ongoing music education for those with financial constraints.

The Foundation provides performing arts scholarships to students with financial needs ages 7-18 in the following disciplines: vocal instruction, dance, acting, instrumental music, film and audio/visual. Students will participate in lessons at local studios within their community.

Performing arts education helps to increase motor and cognitive skills, but also teaches students leadership, teamwork, responsibility, independence, creativity, and increases self-esteem.

Requirements:

- Parent/guardian must complete an application
- Submit a video of 3 minutes or less or write an essay of two paragraphs or more.

Scholarship Details:

- The program runs throughout the school year.
- Students will take lessons at a local participating studio.
- The parent/guardian is responsible for transportation to and from the participating studio.
- Parent/guardian and student must abide by all rules set forth by the participating studio.



- If you are unable to provide any of the following, please note below in your application: dancewear, instrument rental, and costumes. Every effort will be made to assist with these items if necessary.
- Providing these items are contingent upon fundraised dollars.

Attendance:

Attendance is key to continuing to receive funding for the lessons. If the student is absent more than 4 times for lessons in the school calendar year their scholarship will be revoked. You will be expected to contact the studio if your child is going to be absent. Please do not schedule any other appointments during the scheduled class time. Attendance will be kept and monitored. Ongoing funding is not guaranteed when an attendance issue becomes apparent.

Instruments and Dance Shoes:

Instruments and dance shoes must be returned if the student leaves the program. Instruments must be returned at the end of each calendared program.

Please note:

The number of students that receive scholarships is limited based on Foundation funds.



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Applicant Information

Student Name: _____ Age: ____ DOB: _____

Home #: _____ Cell #: _____

Address: _____

Town: _____ Zip: _____

Email Address: _____

School: _____ Grade: _____

Does Applicant Work? _____ Occupation: _____ Annual

Salary: \$ _____

Select One Discipline:

Dance:

_____ Creative Movement _____ Ballet _____ Tap _____ Jazz

_____ Contemporary _____ Lyrical _____ Hip Hop

Sizes: Shoe: _____ Leotard: _____ Tights: _____

Vocal:

_____ Broadway _____ Classical _____ Country

_____ Jazz _____ Pop _____ Rock

Other:

_____ Acting _____ Musical Theatre _____ Film

_____ Instrumental

Instrument Interested in Learning: _____



Reason for Applying for Scholarship:

Do you have adequate transportation to and from lessons? Yes No

How far are you willing to travel to lessons? _____

Have you had any prior experience in the discipline you are seeking a scholarship for? _____

If yes, provide details:

Please include below any additional pertinent information which you feel the Zzak G. Applaud Our Kids Foundation, Inc. should be aware of to help us determine your eligibility.



Parent Information

Parent/Guardian Name: _____

Occupation: _____ Annual Salary: \$ _____

Address: _____

Phone #: _____ Email: _____

Parent/Guardian Name: _____

Occupation: _____ Annual Salary: \$ _____

Address: _____

Phone #: _____ Email: _____

of Dependent Children in the Household: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Relationship to Student: _____

Emergency Contact Name: _____



Emergency Contact Number: _____

Relationship to Student: _____

I certify that all the information provided above is current, true, accurate and complete to the best of my knowledge. Please note that if you provide any false information your child will not be eligible to receive this scholarship.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Submitting Your Application

- Please send your application to Melissa@applaudourkids.org