



## Main Street Theatre & Dance Alliance

548 Main Street NY, NY 10044 T: (212)371-4449 E: [info@mstda.org](mailto:info@mstda.org) W: [www.mstda.org](http://www.mstda.org)

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## Scholarship and Work-Study Qualifications & Requirements

MST&DA is pleased to offer scholarships and work-study to families and individuals who qualify. Please see the requirements below. Scholarship awards range from 20% to 80% of the class fees. Our scholarship funds are limited, so not everyone who applies may receive financial assistance. However, we are committed to making the MST&DA program available to all regardless of means. New applications are required for each semester. Continuation of the scholarship is not guaranteed.

### Requirements:

- Combined family income must be \$100,000 or less.
- Copies of one of the following must be furnished:
  - Federal Tax Returns for each parent,
  - Public Assistance budget letter, or
  - Social Security Award letter.
- Regular attendance is expected. We want all scholarships to go to students who will take advantage of it.
- Volunteers are necessary for MST&DA. Scholarship families are asked to assist at events

**Work-Study:** The same requirements listed above.

- Work-study participants assist the teachers and directors. It is similar to an internship. It requires a weekly commitment.
- Class fees are waived.
- Work-study is only available to older, experienced students.

### Considerations:

- The percentage (20% to 80%) awarded depends on family income.
- Scholarships can be awarded for up to two dance or fitness classes and one theatre class for each applicant. Additional classes may be possible at the discretion of MST&DA.
- Frequent absences and tardiness will be a factor in determining future scholarship eligibility.
- All payments must be made before the first class.

**Scholarships are funded by MST&DA & Public Purpose Funds obtained from outside sources. Information obtained will be made available for review to entities granting funding.**

All applicant information is confidential and will be used for scholarship committee purposes only.

By Signing this, I/We agree to:

- All of the requirements listed above
- All information submitted is true
- Incorrect or false information submitted will result in a revocation of any scholarship assistance

\_\_\_\_\_  
Applicant, Parent/Guardian Signature      Print Name      Date

\_\_\_\_\_  
Committee Member Signature      Print Name      Date

If you have questions or concerns, please contact MST&DA Scholarship/Work-Study at info@mstda.org or by phone at: 212-371-4449

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**DO NOT WRITE BELOW THIS LINE**

\_\_\_\_\_  
Documents Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Proof of Income:

- Tax Record
- Budget Letter
- Award Letter

Accepted By: \_\_\_\_\_ Approval Date: \_\_\_\_\_ Amount/Percentage: \_\_\_\_\_