band | choir | theatre | dance

Willow Glen Performing Arts Boosters

Bringing the Arts to Life For Our Middle & High School Students

Scholarship Request Form

Student Name:_____

Teacher Name: _____ Period: _____

Activity or program funds are to be used for: _____

Date of Request: _____ Amount Requesting: $_____

Are there any other sources of funds? Yes (specify) _____ No _____

We only have scholarship funds available because of the fundraising efforts of many parent volunteers. In order for the student to be eligible for a scholarship, the student and/or the parent/ guardian or other family member is required to volunteer _____ hours during the school year the scholarship is given to contribute to this effort by checking a minimum of (1) one volunteer opportunity below that you plan to participate in: _____
initial here

☐ _____

☐ _____

☐ _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Phone #: _____

Volunteer hours confirmed by: _____ Date: _____

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(Please do not write below this line.)

_____ _____ _____

PAB President Date PAB Treasurer

Board recommendation/vote: _____ Amount funded: $_____

Scholarship allocations may be revoked or changed at any time.
In all cases, allocations will not be funded if sufficient donations have not been received.

09/2013