

2019-2020 Scholarship Requirements

2020 Spring Application Deadline

Thursday, December 05, 2019 by 5:00 PM



Scholarship Applicants must be:

- A Maui resident
- 7- 18 years old
- Or entering 2nd grade or higher (public, private, or home school)

Maui Academy of Performing Arts awards scholarships to students based on their financial need and commitment to the performing arts. Scholarship applications are reviewed and awarded by a panel of MAPA staff and board members. Scholarship committee may request additional information.

Scholarships are kept on file for one year beginning in the summer and ending in the spring. In the event that you would like to apply for a scholarship again within this Summer 2019- Spring 2020 school year you may request that we use the application we have on file. Simply submit your new registration form and payment by the scholarship deadline for the current semester with “Scholarship Application on File” written on the top of your registration form. **IF YOU HAVE A SCHOLARSHIP ON FILE WE WILL NOT ASSUME THAT YOU WOULD LIKE TO RE-APPLY EACH SEMESTER. YOU MUST REQUEST THAT YOU BE RECONSIDERED FOR SCHOLARSHIP EACH SEMESTER BEFORE THE SCHOLARSHIP DEADLINE.** All scholarship applications must be renewed and resubmitted in the summer of 2020.

It has always been MAPA’s pleasure to award scholarships. To ensure integrity, MAPA’s Board of Directors adopted the following policies and guidelines:

1. As respected and honored members of MAPA, scholarship recipients agree to conduct themselves as professionals, attend all scheduled classes and honor all work time commitments.
2. Scholarship recipients may study only at MAPA sponsored classes during the scholarship period and may not study at another studio or be a member of another dance group or drama group offering the same type of classes. Exceptions are made for school and church activities.
3. Scholarship recipients and their families may be asked to volunteer their time toward MAPA projects as designated by the MAPA staff.
4. Scholarship awards may be rescinded if a student fails to attend required classes; perform specific required scholarship duties; comply with above guidelines; or behave properly.

Scholarship Application Check List:

The following must be submitted by the scholarship deadline.

Incomplete and/or late applications will be disqualified.

- Completed Registration Form
- Completed Financial Statement
- Copy of most recent **Federal Income Tax 1040 with ALL attachments, schedules & W2's.**
If parents filed separately, a copy of each parent's forms is required.
- A short essay written by the student explaining how MAPA and the performing arts benefits him/her.**
- 25% of your total tuition plus all applicable fees. (Registration fee and Payment Plan fee)**
Does not apply to Summer applicants.

2020 Spring Deadline:

Thursday, December 5, 2019 by 5:00 PM

Applications may be submitted by mail, fax, email or in person.

2050 Main Street, Suite 3G, Wailuku, HI 96793

Phone | 244-8760 Fax | 244-6530

register@mauiacademy.org



Maui Academy of Performing Arts

2050 Maine St. Suite 3G ~ Wailuku, HI 96793
808-244-8760 or Fax 808-244-6530

CONFIDENTIAL

Parents' Confidential Financial Statement

for Financial Aid Scholarships Summer 2019- Spring 2020

A

Student Applicant Information

Student A

1 Last Name _____ First Name _____
 Date of Birth (mm/dd/yyyy) _____ / _____ / _____ Gender: M F

2 Grade (2019/2020 school year) _____ School _____

3 Relationship of parent/guardian in Section B: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

4 Student lives with: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

Student B

1 Last Name _____ First Name _____
 Date of Birth (mm/dd/yyyy) _____ / _____ / _____ Gender: M F

2 Grade (2019/2020 school year) _____ School _____

3 Relationship of parent/guardian in Section B: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

4 Student lives with: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

Student C

1 Last Name _____ First Name _____
 Date of Birth (mm/dd/yyyy) _____ / _____ / _____ Gender: M F

2 Grade (2019/2020 school year) _____ School _____

3 Relationship of parent/guardian in Section B: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

4 Student lives with: *(Check all that apply)*
 Mother Father Stepmother Stepfather Female guardian Male guardian

B

Parent or Guardian Information

5 Mailing Address to which all correspondence will be sent:
 Number and street or PO Box _____
 City _____ State _____ ZIP code _____ - _____

Parent A

6 Last Name _____ First Name _____
 Home address _____
 City _____ State _____ ZIP code _____ - _____
 Occupation _____ Title _____
 Employed by _____ Years w/firm _____ Part time Full time

Parent B

6 Last Name _____ First Name _____
 Home address _____
 City _____ State _____ ZIP code _____ - _____
 Occupation _____ Title _____
 Employed by _____ Years w/firm _____ Part time Full time

Family Assets and Debts

| | | | |
|---|----------------------------------|---|--|
| <p>7 a Home (if owned - See C9 if renting)</p> | Present Market Value \$ _____ | Unpaid principal on 1st mortgage \$ _____ | Annual payments on 1st mortgage \$ _____ |
| <p>b Do you have a second mortgage or equity loan on your home? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes please fill in the lines to the right</p> | | Unpaid principal on 2nd mortgage / equity loan(s) \$ _____ | Annual payments on 2nd mortgage / equity loan(s) \$ _____ |
| | TOTALS a plus b | \$ _____ | \$ _____ |
| <p>c All other real estate (use #10 for any additional property)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> | Present Market Value \$ _____ | Unpaid principal on other real estate \$ _____ | Annual payments on other real estate \$ _____ |
| | TOTALS | \$ _____ | \$ _____ |

8 Provide current year information for all dependent children. Enter first and last names. The number of the dependent children should be the same as entered in 7e. List student applicants first, in order of Section A, Student A, B & C. List all children, those applying for aid and those not applying for aid. Use a separate piece of paper if necessary.

| | Name of current childcare, preschool, school, or college | Grade | Age |
|--------------------------------|--|-------|-------|
| 1 Full Name of dependent _____ | _____ | _____ | _____ |
| 2 _____ | _____ | _____ | _____ |
| 3 _____ | _____ | _____ | _____ |
| 4 _____ | _____ | _____ | _____ |
| 5 _____ | _____ | _____ | _____ |

| Cost of childcare, preschool, school or college | Amount of this cost paid by: | | | | | |
|---|------------------------------|------------------------|----------|----------------------------------|---|-----------------------------------|
| | a. Parent or guardian | b. Financial aid award | c. Loan | d. Students' assets and earnings | e. Friends, relatives, & trust funds (explain in #10) | f. Other sources (explain in #10) |
| 1 \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| 2 \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| 3 \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| 4 \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |
| 5 \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ | \$ _____ |

| | | |
|--|-------------|----------------|
| <p>9 a If you rent your family residence, provide total amount of annual rent for:</p> | Actual 2018 | Estimated 2019 |
| | \$ _____ | \$ _____ |
| <p>b Please list annual amounts for all of the following you are receiving:</p> | | |
| <input type="checkbox"/> Food Stamps | \$ _____ | \$ _____ |
| <input type="checkbox"/> HUD | \$ _____ | \$ _____ |
| <input type="checkbox"/> WIC | \$ _____ | \$ _____ |
| <input type="checkbox"/> Welfare | \$ _____ | \$ _____ |

10 Thanks to the generosity of the Maui Filipino Working Group, we are honored to offer scholarships to youth of Filipino descent. Please check below:

a My child is of Filipino descent:

b My child is NOT of Filipino descent:

c Prefer not to answer:

11 Please use this space to provide the scholarship committee with any additional information you feel is important to help them render a decision.

12 We understand that this information is confidential and will only be used by MAPA in determining scholarship allocations. We declare that the information reported on this form, to the best of our knowledge and belief, is true, correct, and complete. We

Parent or
Guardian 6A

Signature _____

Date _____

Home phone [][][][] - [][][][][]

Work [][][][] - [][][][][]

Cell [][][][] - [][][][][]

Parent or
Guardian 6B

Signature _____

Date _____

Home phone [][][][] - [][][][][]

Work [][][][] - [][][][][]

Cell [][][][] - [][][][][]