

Tree of Life Cultural Foundation 501(c)(3)

## OPPORTUNITY SCHOLARSHIP

(Pay-What-You-Can)

*Scholarship funding is limited, and is awarded on a first come, first served basis.*

### Wild Roots Fine Arts - Youth Choral League Scholarship Application Form

Name of Applicant: \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Name of Consenting Parent/Guardian: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

How much are you able to contribute toward the cost of tuition? \$ \_\_\_\_\_

Which session are you applying for? Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Has applicant previously received a TOLCF scholarship? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide which program/class and the total amount awarded.

Write a paragraph explaining why the applicant would be an ideal candidate to receive this scholarship. (Reasons can be need and/or merit based)

(continue on back or attach separate sheet, if needed)

*I certify that the information contained in this application is true to the best of my knowledge.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Consenting Parent/Guardian

\_\_\_\_\_  
Date

Please mail application to: Tree of Life Cultural Foundation / 450 W Main St / Forest City, NC 28043  
OR scan form and email to: wildrootsfinearts@gmail.com

**Scholarship application deadline is 2 weeks prior to the start of program.**