SCHOLARSHIP / FINANCIAL AID REQUEST APPLICATION

Performance Edge offers scholarship monies based on financial need.

DUE by MARCH 29th



2019 SUMMER SHOWCASE INTENSIVE

	Name of Student:
	Name of Parent(s) or Guardian:
	Address:
	# And ages of occupants in household:
<u>Pleas</u>	se provide either: (Incomplete applications will not be eligible for consideration.)
	 A brief explanation of your need <u>and</u> one of the following: Most recent Federal Tax Return W2 Forms documenting income on tax return The previous two months pay stubs for all wage earners in the family
	A brief explanation of your need <u>and</u> completion of the following information:
	INCOME STATEMENT: Annual Household Income before deductions:
	Places of Employment or Source(s) of Income:
	EXPENSES: Rent/Mortgage (monthly) Car payment (monthly)
	Other expenses pertinent to this statement:
I certi	Ify that the information above is correct.
Signa	ature: Date:
Hom	e phone: Work phone:
CONF	IDENTIALITY NOTICE:

All information disclosed in this form is for the intended use of Performance Edge, Inc. and will remain confidential.

OR

Email to: lisayblair@outlook.com

Mailing Address:

Performance Edge 3434 Edwards Mill Road, Suite 112-346 Raleigh, NC 27612