

200 S. Tucson Blvd, Tucson AZ 85716 520-623-3373 Website: ballettucson.org email: school@ballettucson.org

Financial Aid Application Workshop 2025

(Please print clearly)

Name of Parent(s)/Guardia	n(s):
Name of Student:	
Address:	
City, State, Zip:	
Email/s:	
Date of Birth:	
SBT Class Level 2024-2025	(if applicable):
Who is the responsible party relationship to the student?	for the payment of tuition and other education expenses and what is the
Name:	Relationship:
What is your annual income?	?
What is your approximate me	onthly living expense total?
Financial Aid will be determine	ned by Ballet Tucson's Artistic Staff and is available on a limited basis.
☐ I understand that ap	plications which are incomplete will not be considered
Financial Aid Application car by mail to June Mullin, Admir	g with any additional documentation to the School of Ballet Tucson. This be submitted via email at school@ballettucson.org, in-person delivery or nistrator at the School of Ballet Tucson. If you choose to mail your o mail them to arrive by April 28, 2025.
Date:	Signed: