



PEARL THEATER  
Dramatically Impacting Lives Through the Performing Arts  
PEARL ACADEMY OF PERFORMING ARTS  
SCHOLARSHIP INFORMATION

A limited number of scholarships are available through the generous sponsorship of Westside Veterinary Hospital in Pearland. These scholarships are based on financial need or other circumstances. Submission of application does not guarantee a scholarship. Please fill out the attached Pearl Academy of Performing Arts (PAPA) Scholarship Application Form.

The Scholarships are offered to underserved communities and families of need for summer camps at the Pearl Theater.

Application Procedure:

- Students may not apply for more than one scholarship per year.
- Applicants must identify the camp for which the scholarship will be used.
- Students must include a letter (spelling will not be judged).
- Applicants may be required to submit reference information.

Take advantage of this unique opportunity to receive financial assistance with your theatre education!

*Pearl Theater's Summer Camp program offers students opportunities for expression, exploration, and the opportunity to make new friends while having fun learning theatre skills.*

Theatre Scholarship Application Form  
Return this application via email along with  
the student-written letter to:

director@pearl-theater.com

PAPA SCHOLARSHIP APPLICATION FORM  
**PEARL ACADEMY**  
*of Performing Arts*

**Basic Information**

Student Name: \_\_\_\_\_

Male  Female Age: \_\_\_\_\_ Grade (current school year): \_\_\_\_\_

School attending: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

Please make us aware of any medical and/or behavioral issues your child may have \_\_\_\_\_

Camp selection: \_\_\_\_\_

Is your participation in this camp contingent upon receiving a scholarship? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you previously received a scholarship from the Pearl Theater? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what camp? \_\_\_\_\_

Parents/Guardians: Please tell us why you would like your child to take this class (use the back of this sheet if necessary): \_\_\_\_\_

**Financial Need:** Please provide the following information:

Number of adults in the household: \_\_\_\_\_ Number of Children in the household: \_\_\_\_\_

1. Has there been a current hardship in the family (please explain; i.e. loss of work, department restructuring, death in the family, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Does your family qualify for free or reduced lunches at school? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. Do you or any member of your household qualify for food stamps? \_\_\_\_\_ Yes \_\_\_\_\_ No

4. Do you or any member of your household qualify for SSI? \_\_\_\_\_ Yes \_\_\_\_\_ No

5. Do any household members receive Medicaid? \_\_\_\_\_ Yes \_\_\_\_\_ No

6. Do you receive Section 8 Housing? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please list a reference (any adult who is not a parent/guardian or relative and has had some interaction with the student) For example, a teacher or a coach:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

I understand that Pearl Theater provides full or partial scholarships and if I accept a partial scholarship, I agree to pay the balance of the camp tuition. I understand that submission of this scholarship application does not guarantee my child a scholarship. If my child does receive a scholarship, I also understand that he or she is to attend camp all days for the full time period. I hereby certify that I am a parent or legal guardian of the child listed on the previous page and that all of the information provided is correct and complete. I recognize that Pearl Theater will rely on that information. I will be responsible for the cost of any emergency medical care provided to my child should Pearl Theater instructors or staff, in their judgment, call 911 on behalf of my child in the event of an emergency. I understand that photographs may be taken during the course of the camp and I consent to the use of said photographs being used for Pearl Theater marketing and promotional efforts without specific written permission.

\_\_\_\_\_  
Parent/Guardian *A physical signature will be required if accepted.*

\_\_\_\_\_  
Signature Date

