

# FAMILY PARTNERSHIP PROGRAM | SUMMER

PROVIDING ASSISTANCE SO THAT EVERYONE MAY BENEFIT



## **FIRST STAGE** Transforming Lives Through Theater

First Stage Theater Academy maintains a strong commitment to making our classes available to all students, regardless of financial circumstances. Thanks to a leading contribution from The Burke Foundation and funds from CDBG Milwaukee and other donors, we are able to provide a wide range of assistance to many families.

- **FINANCIAL AID** First Stage Theater Academy offers need-based financial aid.
- **INTERNSHIP OPPORTUNITIES** Experienced Academy students in grades 8 and older can earn tuition credits by working as a First Stage Theater Academy intern.
- **TRANSPORTATION AND LUNCH** A lunch can be provided if needed. Advance notice is appreciated. Families receiving financial aid are eligible for transportation assistance from First Stage if a mode of transportation is not available. Certain restrictions may apply.

Funded in part by



**QUESTIONS? CONTACT THE ACADEMY OFFICE AT (414) 267-2970 OR ACADEMY@FIRSTSTAGE.ORG**

**IF YOU ARE APPLYING FOR FINANCIAL AID, REGISTER BY MAIL OR IN PERSON ONLY. ONLINE REGISTRATION IS UNAVAILABLE. ATTACH THIS APPLICATION TO YOUR REGISTRATION FORM.**

**TO ENSURE THAT YOUR APPLICATION WILL BE PROCESSED, BE SURE TO INCLUDE:**

- 1 YOUR CLASS REGISTRATION
- 2 \$35 REGISTRATION DEPOSIT
- 3 A COPY OF ADDITIONAL PAPERWORK

### ADDITIONAL PAPERWORK REQUIRED

Please attach a copy of both sides of the first page of your most recent federal income tax return. This information will be kept strictly confidential. Financial aid applications without this attachment will not be processed. If you do not file taxes, proof of income or benefits must be submitted (i.e. Child Support Statement, Unemployment Benefits, VA benefits, W-2 benefits, 4 most recent paystubs, Alimony Settlement, Foster Care Subsidy Letter, etc.)

### PARENT MUST READ, CHECK AND SIGN BELOW

- I understand that if I receive financial aid, my student is required to attend his/her session consistently. Failure to attend class sessions without notifying First Stage may result in additional fees charged to me.
- I understand that I am not eligible for financial aid if I have any previous outstanding balances.
- I understand that my student's ongoing involvement is contingent upon positive and successful participation.

Parent/Legal Guardian Signature

Date

**Mail or drop-off applications to First Stage Theater Academy  
325 W. Walnut Street  
Milwaukee, WI 53212**

**Class placement cannot be guaranteed if the \$35 registration deposit and supporting documents are not received.  
Please allow 1-2 weeks to process your financial aid request.**

CONTINUED...

PLEASE COMPLETE ONE FORM FOR EACH STUDENT. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

Student's Name \_\_\_\_\_  Male  Female Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Ethnicity (optional—for grant reporting purposes only):  Asian / Pacific Islander  Black or African American  
 Hispanic or Latino  Native American or American Indian  White  Opt Out  Other \_\_\_\_\_

School in fall 2020 \_\_\_\_\_ Grade in fall 2020 \_\_\_\_\_

My student's school is:  MPS  Not MPS, but located in the City of Milwaukee  Other district

Parent/Legal Guardian Name \_\_\_\_\_

Parent/Legal Guardian Daytime Phone \_\_\_\_\_ Parent/Legal Guardian Evening Phone \_\_\_\_\_

Parent/Legal Guardian Mobile Phone \_\_\_\_\_ Email address \_\_\_\_\_

Which adult assumes financial responsibility for the student?  
 Mother  Father  Legal Guardian  Other: \_\_\_\_\_

Does the student receive free or reduced lunch at school?  Yes  No

Check any/all that apply:  Single Female Head of Household  Parents separated/divorced  
 Father/mother unable to work  Father/mother is deceased

Are you currently receiving benefits from Wisconsin Works/W-2? (Including, but not limited to FoodShare, Medicaid, child care assistance, and Job Access Loans)  Yes  No

**PAYMENT**

**First Stage will work with all families to ensure students are able to enjoy classes in all of our locations. Please fill out the following questions to assist us in distributing financial aid.**

Parent/Legal Guardian Occupation \_\_\_\_\_ Place of Employment \_\_\_\_\_

Parent/Legal Guardian monthly earnings (before taxes) \_\_\_\_\_

Please list all additional sources of income (including but not limited to: Alimony, Support from a Non-custodial Parent, Veterans/ Social Security benefits, Unemployment or Worker's Compensation, etc.).

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

TUITION	
Class tuition total . . . . .	\$ _____
New Student (one-time application fee \$20) . . . . .	+ \$ _____
<b>TOTAL BALANCE</b> . . . . .	<b>\$ _____</b>

Please indicate an amount that your family can contribute to the cost . . . . . \$ \_\_\_\_\_

Please elaborate on your reason(s) for this financial aid request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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