



**Today's Date:**  
**Application Received by:**

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# PACIFIC ACADEMY FOUNDATION

## SCHOLARSHIP APPLICATION FORM

**Today's Date:**  
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### PHOTO RELEASE

I, the undersigned, hereby grant permission to Pacific Academy Foundation the right to use and copyright photographs of me without restriction for any purpose such as, but not limited to, promotion, advertising, and public relations. I hereby release and discharge Pacific Academy Foundation from any and all claims and demands arising out of or in connection with the use of the photographs, including any and all claims for libel.

\_\_\_\_\_  
Patient/Guardian Name

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

\_\_\_\_\_  
Patient/Guardian signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

### PARENT/GUARDIAN INFORMATION (Primary Contact)

Parent/Guardian Last Name:	First Name:	Middle:	Title:
Relationship:	Living with applicant?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Home Address:	City:	State and Zip:	
Citizenship:	Marital Status:	Occupation:	
Home Phone:	Cell-phone:	Work Phone:	
Email:			

### PARENT/GUARDIAN INFORMATION (Secondary Contact)

Parent/Guardian Last Name:	First Name:	Middle:	Title:
Relationship:	Living with applicant?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Home Address:	City:	State and Zip:	
Citizenship:	Marital Status:	Occupation:	
Home Phone:	Cell-phone:	Work Phone:	
Email:			



FINANCIAL INFORMATION

Size of household:

Do you own or rent your residence?

☐ Own, monthly mortgage amount \$ \_\_\_\_\_ ☐ Rent, monthly rent amount \$ \_\_\_\_\_

Do you have any other investments?

☐ Real estate ☐ Bonds, stocks, funds, annuities ☐ Retirement ☐ College Savings ☐ Other

Do you own or partially own any business? ☐ Yes, the net worth is \$ \_\_\_\_\_ ☐ No

Please disclose the total balance of your bank accounts, including checking and savings: \$ \_\_\_\_\_

What is your Annual Adjustable Gross Income (AGI) from the most recent tax return? \$ \_\_\_\_\_ ( year \_\_\_\_\_ )

Please attach with this application: 1) Most current year tax return; 2) Most recent three months of bank statements  
3) Most recent three months of all credit card statements

Any financial aid provided to your family? ☐ Yes (Please list them here) ☐ No

Name of the financial aid received	Amount	Frequency

Please disclose the annual expense you invested (or will invest) in developing your child's unique talent(s).




### IN CASE OF EMERGENCY

Name of local friend or relative:	Relationship to student:
Home phone no.:	Work phone no.:

### PARENT/GUARDIAN CONSENT

**Please initial in each bullet and sign at the bottom.**

- ☐ \_\_\_\_\_ The above information is true to the best of my knowledge.
- ☐ \_\_\_\_\_ I hereby authorize my child, \_\_\_\_\_, to participate in auditions or other events held by Pacific Academy Foundation and its affiliations. I understand that I will receive no financial assistance for participating in such events, and that Pacific Academy Foundation has my permission to use the photographs of my child taken from the audition.
- ☐ \_\_\_\_\_ I hereby release Pacific Academy Foundation, its employees, associates, and its affiliations from any and all liability arising from the participation in the activity/activities should there be damage or injury occurred in the events.
- ☐ \_\_\_\_\_ In case of emergency, I consent that Pacific Academy and its affiliation seek medical assistance for my child as necessary, including emergency care and paramedics, should I be absent. I assume full financial responsibility for all medical expenses incurred.
- ☐ \_\_\_\_\_ «Photo Release» I hereby grant permission to Pacific Academy Foundation the right to use and copyright photographs of my child without restriction for any purpose such as (but not limited to) promotion, advertising, and public relations. I hereby release and discharge Pacific Academy Foundation from any and all claims and demands arising out of or in connection with the use of the photographs, including any and all claims for libel.

\_\_\_\_\_  
Patient/Guardian signature

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date