

Schomp Summer Scholarships
Information & Application 2021

The Schomp Summer Intensive Scholarships provide need-based support for rising DSA Freshmen, Sophomores, Juniors and Seniors to attend summer intensives/programs. These program opportunities should enhance the students’ current artistic skills, as well as advance college admission and scholarship potential.

These funds are not intended to support DSA-sponsored programs or ensemble travel/festival participation by DSA departments. Acceptance into a summer program is not mandatory when applying for funding, so you can apply prior to being accepted.

Scholarships are intended to cover a portion of program expenses including tuition, fees, room and board. Preference will be given families who demonstrate financial need. Scholarship recipients are expected to submit a short (300-500 words) essay summarizing their experience, which is due August 15, 2021. Applications and essays should be sent to info@dsafriends.org, along with any questions regarding this program and its application.

APPLICATION PROCESS:

1. Complete all sections of this application. Incomplete applications will not be considered.
2. Include a typed explanation addressing the narrative question on the next page. Minimum of one page for responses, no more than 2 pages.
3. Submit completed application (including attachments of the narrative and optional Statement of Need) electronically to info@dsafriends.org with “Schomp Summer Intensive Scholarship” in the subject line by March 15, 2021.

APPLICATION DEADLINE IS MARCH 15, 2021.

Name of Parent/Guardian:	
Parent/Guardian Email:	Phone Number:
Student’s Name:	Major:
Student’s Grade (Fall 2021):	
Street Address:	
City, State, Zip:	

SECTION 1

Name of Institution: _____

Name of Summer Program: _____

Dates of Summer Program: _____ Program Application Deadline: _____

Program Acceptance Deadline: _____ Total Program/Instruction Hours: _____

Please provide tuition and cost details:

Tuition \$ _____

Transportation \$ _____

Lodging \$ _____

Meals \$ _____

Other program - related need: _____

Feel free to use this space for any further details on program costs.

Total amount of financial assistance requested: \$ _____

SECTION 2

Provide a response to the below question. Responses should be a minimum of one page, 2-page maximum, typed, Arial 12pt font, 1-inch margins, double-spaced. Applications that do not follow this requirement will not be reviewed.

Explain the goals of this summer intensive/workshop and how it supports your current development as an artist. What advances do you intend to achieve by attending this program?

OPTIONAL - Select one of the below options to indicate financial need.

I (Parent/Guardian) certify that our household income does not exceed the below amounts, based on 80% of the Denver Area Median Income/AMI.

# of People in Household	2 People	3 People	4 People	5 People	6 People
Income Less Than	\$59,400	\$66,850	\$74,250	\$80,200	\$86,150

I (parent/guardian) have included a Statement of Need with this application. I will include it as an attachment when submitting the application.

Parent/Guardian Signature

Date

