## PENNSYLVANIA YOUTH THEATRE: 2024-2025 SCHOLARSHIP APPLICATION

Stud	dent Applicant's Name			_ Age	Date of Birth	
Hom	ne Address		Cou	inty of Res	sidency	
	deSchool					
	nes of Parents/Guardians					
Phor	ne(s)	Alt	ernate Phone(s)			
If yes <b>comn</b> Marit Who	e applicant receiving scholarship funds, for what?	Has the Has t	ne applicant attended PYT ve your child write a parag d □single	「? If y raph about	es, please write and att why PYTis important to	ach a paragraph them.
	ANCIAL INFORMATION:					
	ather/guardian's Job Title					
	other/guardian's Job Title otal Family Yearly Income 2023					
	• •		<del></del>			_ 2022
	d the family receive any state or fede		-		-	
	Social Security Income					
o. Lis	st any unusual family expenses in the	; past year (such as medi	car expenses or cring sup	port)		_
8. Ple	d the student applicant file income tage ease list any non reportable income (		<del></del>		<u></u>	
	IDENT INFORMATION:	NT for how many years?				
	the applicant has been a student at P					
2. P	Please list prior performing arts exp	erience (List school, cla	sses taken & # of years	5)		
3. Pl	lease list any other performing arts cla	asses the applicant plans	to enroll in this year. (Lis	t school and	d class(es) to be taken	)
4. If a	a teacher is recommending the applic	 cant. please list their name	e:			
If you	1. A completed, signed 2023-2024 PY 2. The applicable \$50 non-refundable 3. A copy of parent/guardian's most recen 4. A copy of the student's most recen 5. You must provide a copy of your 20 www.irs.gov/Individuals/Order-a-Tur family did not complete a tax return	YT Registration Form. e first year registration fee recent Form 1040 (pages at Form 1040 (pages 1 & 2 022 IRS Tax transcript. Yo Franscript n within the last year, plea	and/or \$50 per division ( 1 & 2, plus Schedule C, E 2) (if applicable). bu can request a tax trans ase provide proof of ass	drama/dand D, E or F if a script by call	ce) deposit. applicable) ling 800-908-9946 or b supplemental income	y visiting: e (see back)
	PLEASE NOTE: DETERMINATIONS STUDENTS HAVING 3 OR M	WILL BE MADE AND AV	VARD NOTIFICATIONS \	WILL BE SE	ENT AFTER 9/1/2024	<u> </u>
S	TUDENT SIGNATURE			Date		
	ARENT/GURDIAN SIGNATURE					
Г			CE USE ONLY			
	Date received			R	v:	
	Received: □ application □ r					
	Award:		Fees:			

Proof of assistance or supplemental income must be provided by a state or federal	
agency. The following forms are acceptable for verification:	
☐ Award letter for free/reduced school lunch and/or food stamps.	
□ Notice of UC determination - proof of Unemployment Compensation Benefits.	
☐ Proof of Social Security benefits (SSA Benefit Statement or SSA - 1099) Proof of disability pay (SSI).	

**Verification of Non-filing,** proof from the IRS that you **did not** file a return for the year. The letter is simple to immediately procure by visiting our local Bethlehem IRS branch on Broad Street. No appointment necessary to obtain a non-filing letter. The IRS local office is located at 3 West Broad Street, Bethlehem. Hours: 8:30-4:30 M-F

https://www.taxoffices.org/pennsylvania-tax-offices/bethlehem-pa-tax-office-3-w-broad-st-18018-irs-tax/

UNACCEPTABLE for verification: W-2 forms, paycheck stubs, bank statements, Access medical card, WIC card