

# IHSDTA

## Scholarship Information

### 2006-2007

#### What is the IHSDTA scholarship program?

The IHSDTA scholarship program consists of a state award to financially assist education beyond high school.

#### Who is eligible for the scholarship?

Any current high school Senior who has completed the following:

- \_\_\_\_\_ Has been nominated by his or her dance director.
- \_\_\_\_\_ Is enrolled in a public or private high school in the state of Indiana, and participates on a dance team that is a member of the IHSDTA.
- \_\_\_\_\_ Has attained at least a 2.75 GPA on a 4.0 scale.
- \_\_\_\_\_ Is planning to continue his or her education or training beyond high school in any accredited training, licensing or certification program, or institution of higher education.

#### How are the IHSDTA Scholarship Winners selected?

A panel of judges made up of director volunteers selects winners. Judges base their decisions on the information contained in the student's application packet. Total scoring will consist of 40% past, current, and future dance experience, including IHSDTA involvement, 20% academic achievement, 20% community involvement, 10% criteria statement, and 10% recommendations. Decisions of the judges are final. The Executive board will determine the amount of the scholarship until an established amount is procured. Winners will be announced during the State Championship awards ceremony. Information will then be sent to the winners regarding payment of the scholarships.

#### The following are instructions for completing the Nomination Packet:

1. The Nomination and Application Form. All information on the IHSDTA Official Application Form must be completed fully. Each applicant is responsible to have his or her nominating coach sign the application and write a letter of recommendation, as well as have **one** additional recommendation letter.
2. The Criteria Statement. You, the student, must write a statement addressing **each** of the following criteria. You must also incorporate in your statement, why you deserve this scholarship.
  - \***Special Talents**
  - \***Leadership**
  - \***Community Involvement**
  - \***Goals**

It is important that the applicant realize that the quality of his/her criteria statement is also considered in the judging. The criteria must be in paragraph form, typewritten, and no longer than two single sided, single spaced pages.

**Please mail completed applications, criteria statement, and recommendations together to**

**Jennifer Bay  
IHSDTA Vice-President  
3920 Manito Blvd.  
Ft. Wayne, IN 46809**

Absolutely **NO** faxed applications will be accepted! It is IMPERITIVE that the application packages be received no later than 4:00 PM Central Standard Time, on December 31, 2006. All components received after this date will cause for disqualification of the nominee. Please call Jennifer Bay at 260-438-9150 if you have any questions.

**Note to Directors: Until we are able to increase the number of applicants, you may submit several applicants from each high school. Thank you for your time and effort!**

**2006-2007 INDIANA HIGH SCHOOL DANCE TEAM ASSOCIATION  
SCHOLARSHIP OFFICIAL NOMINATION AND APPLICATION**

**1. Student Information**

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Last Name	First Name	Middle Initial	
<hr/>			
Home Address	City	State	Zip
(____)	_____ - _____ - _____		
Home Phone	Applicant's Social Security Number		
	(____) _____		
School Name	School Phone		
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School Address	City	State	Zip
		M____ F____	
Date of Birth	Gender		

**2. Intended Professional**

Career: \_\_\_\_\_  
(examples: Dancer, Teacher, Lawyer, Secretary) Name of school you will attend \_\_\_\_\_

**3. Grade Point Average Verification [This section must be fully completed by a school official only]**

I, \_\_\_\_\_, certify that \_\_\_\_\_ has a cumulative  
(Print name of official) (Print student's name)  
GPA of \_\_\_\_\_ on a 4.0 scale or \_\_\_\_\_ on a 12.0 scale

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Signature	Title	Date
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4. **References:** Letters from two adults must be included. Reference letters are not to be written by the student, anyone under 21 years of age, or anyone related serving as the legal guardian of the student. One reference letter should be from his/her academic or community environment, and the other from the applicant's dance director. At least one phone number must be included for each reference.

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Last Name	First Name	Association with Student
(____)	_____	(____) _____
Day Time Phone Number	Evening Phone Number	

5. **Nominator:** Nomination must be made by the applicant's dance director.

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Last Name	First Name	Prefix (Mr. Mrs., Ms.)
(____)	_____	(____) _____
Day Time Phone Number	Evening Phone Number	

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Signature	Date
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