

## **Personal Information Form**

Name:			
Mailing Address:		Names of Dance Schools & Years  Attended:	
Date of Birth:	Place of Birth:		
Place of Residence:			
Home Address:			
		Level of Dance Training Achieved:	
Email:	Fax:		
Phone: (Home)	(Cell)		
☐ Bursary Funds  Name of Dance Teacher Provi		ttach recommendation):	
		nce):	
Personal Financial Informa	tion		
List other funding you have receive	ved for this programme:	List other scholarships for which you have applied:	
SOURCES TO BE APPLIED TO FOUNDATION SCHOLARSHIP  PARENTAL SUPPLEMENT	THE SCHOOL YEAR FOR WH P, EXCEEDS THE TOTAL COST TAL INFORMATION: I HAVE A	CCEPT OTHER SCHOLARSHIPS, LOANS OR AWARDS FROM OTHER ICH I AM APPLYING HERE, WHICH TOGETHER WITH THE OF ATTENDANCE AT THE CHOSEN INSTITUTION.  ATTACHED A WRITTEN PERSONAL SUBMISSION, WHICH INCLUDES MY BURSARY REQUEST. (BURSARIES ONLY)	

NDFB RESERVES THE RIGHT TO DENY FINANCIAL ASSISTANCE. NDFB RESERVES THE RIGHT TO PUBLICLY STATE THEIR ASSISTANCE, ALL APPLICATIONS WILL BE CONSIDERED INA FAIR AND EQUITABLE MANNER AND ACCORDING TO NDFB MEANS. ALL DECISIONS MADE BY THE SCHOLARSHIP COMMITTEE ARE FINAL.