

**UPDIKE FAMILY FUND SCHOLARSHIP**  
**SCHOLARSHIP for 2024 SCORE Participants**  
***NO APPLICATIONS ACCEPTED AFTER JUNE 3***

**Background Information:**

The Updike Family Fund can be used for financial assistance in the form of a scholarship to participants in the SCORE program.

Our goals for those funds are as follows:

- To provide an opportunity for students to participate who might not otherwise be able to attend.
- To honor the commitment and sacrifice current participants have made to the program and allow them to benefit from these funds.
- To be fair to all.

We are making these funds available to students on a self-identification basis, knowing that participants will respond with honesty and fairness.

**The Process:**

1. Students will apply for this scholarship by completing the accompanying form and returning it to the theater **BY JUNE 3**.
2. Return the checklist and any accompanying forms to: Education Director at 125 W. Jefferson Blvd. 46802.
3. Most scholarships will be based on need. The \$50 non-refundable deposit is the responsibility of the scholarship recipient.
4. Students will be notified by email if approved for financial aid.
5. Students must accept the financial assistance within 24 hours of notification.
6. **If a full scholarship is not granted and a partial scholarship is given, remaining tuition must be paid in full by June 14.**

*\*All information will be kept confidential*

**UPDIKE FAMILY FUND APPLICATION**  
Please complete the following form and return it to

**Education Director 125 W. Jefferson Blvd. Fort Wayne, IN 46802**

Funds are only offered to students attending public schools, charter schools, home schools, or private schools on a voucher program. "Parent" refers to any legal guardian.

Our funds for financial assistance are available to students and families on a needs basis. If you fit any of the following circumstances, you are eligible to apply for assistance without further documentation. If you have other circumstances not listed, please explain your situation in an accompanying letter.\*

Mark any that apply.

\_\_\_\_\_ Student is on free/reduced lunch.

\_\_\_\_\_ Parent(s) unemployed or underemployed (*Working a lower-paying job than expected based on training, education or other skills.*)

\_\_\_\_\_ Single-income family.

\_\_\_\_\_ Parent is ill or disabled.

**REQUIREMENTS OF SCHOLARSHIP:**

➤ **Complete this application by writing a brief essay stating your main interests, any achievements, major goals, and how you plan to achieve those goals. A SIGNATURE IS REQUIRED ON YOUR ESSAY.**

➤ **A letter from a teacher or faith leader that helps explain student needs.**

➤ **TO BE CONSIDERED FOR THIS SCHOLARSHIP, ALL MATERIALS MUST**

**ACCOMPANY THIS FORM!**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**(PLEASE PRINT)**

Student

Signature: \_\_\_\_\_

Parent

Signature: \_\_\_\_\_

Home or Cell Phone Number: \_\_\_\_\_