

## **THE FRANNIE BURNETT FIGURE SKATERS SCHOLARSHIP FUND**

The Frannie Burnett Figure Skaters Scholarship Fund was established in memory of one of the Skating Club at Dartmouth's (SCAD) former Senior Ladies Champions. It is a non-profit, tax-exempt fund receiving monies from private donations and from Skating Club at Dartmouth special events. A Board of Trustees manages the Fund.

**The fund provides financial support to those in need who wish to develop or improve their figure skating capabilities.** Scholarships are distributed to recipients to reduce some of the following costs: Summer (July), Fall (September-December), and Winter (January-April) memberships, and equipment. It should be noted that no recipient has received funds to cover the entire cost of skating with SCAD.

**Skaters interested in applying for an award must fill out the application form, and send it to:**

Linda Hull  
14 Morrison Road  
Hanover, NH 03755  
(603) 643-9262

You can see that we require no financial statement, 1040 form, or the like. However, as our funds are limited, and as many requests for support are received, we trust that you will be completely honest with your answers so that we may indeed distribute our funds to those most in need. Be assured that all requests are handled with strict confidentiality.

Please be sure to complete other Club forms and arrangements as required by that skating session. You will be notified regarding your scholarship application. Awards covering membership fees will be paid directly to SCAD.

The Frannie Burnett Figure Skaters Scholarship Fund awards scholarships without regard to race, creed, religion, or age.

# THE FRANNIE BURNETT FIGURE SKATERS SCHOLARSHIP FUND APPLICATION

- 1. Name \_\_\_\_\_
- 2. Address \_\_\_\_\_
- 3. Telephone(\_\_\_\_)\_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_
- 4. Skating Level \_\_\_\_\_ Years Skating \_\_\_\_\_
- 5. Mother's Name and Address \_\_\_\_\_

6. Father's Name and Address \_\_\_\_\_

7. Scholarship amount requested, if known \$ \_\_\_\_\_  
 Scholarship requested for (Please Check) Membership \_\_\_\_\_ Equipment \_\_\_\_\_

**The following information must include ALL persons financially responsible for the skater. It is confidential.**

8. Number of family members \_\_\_\_\_

9. Family income: \_\_\_\_\_ Under \$20,000 \_\_\_\_\_ \$20,000-\$35,000  
 \_\_\_\_\_ \$35,000-\$50,000 \_\_\_\_\_ \$over \$50,000

10. Does the family own their own home? \_\_\_\_\_

11. Does the family own a second home? \_\_\_\_\_

12. Does the skater participate in summer skating away from the Skating Club at Dartmouth? \_\_\_\_\_ Where? \_\_\_\_\_ #of weeks \_\_\_ Cost \_\_\_\_\_

13. Please list any other scholarships or financial aid you are receiving: \_\_\_\_\_

14. Please list all other activities the skater participates in (e.g. gymnastics, riding, skiing, soccer, etc.) and their costs:

Activity	Cost	Activity	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. Please attach a sheet with any other information that will be helpful in processing this application.