

Square Dance Minnesota, Inc.
Instructor Scholarship Application

Expenses covered by the instructor scholarship will be only for tuition and/or travel to the event.

Requested Amount: \$ _____

Name: _____

Organization: _____

Address: _____

E-mail: _____

Phone: _____

Type of Instruction: _____

Location of Instruction: _____

Tuition Cost: \$ _____

Travel Cost: \$ _____

Dates of Instruction: _____ through _____

Instruction Details: _____

Have you applied to other organizations for assistance: Yes, No

If yes, identify the organization(s): _____

If yes, amount requested/provided: \$ _____

Within a week of completion of the event, submit copies of receipts for expenses and explanation of what was accomplished.

After expenses are verified by the financial director, a check will be issued for the amount approved initially by the Square Dance Minnesota, Inc. Board.