



Ovation Academy for the Performing Arts

2026 Scholarship Application

Parent/Guardian Information

Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone _____ Email _____

How did you hear about Ovation? _____

Student Information

Name: _____ DOB: _____
Last First M.I.

Age: _____ School: _____

Prior Ovation Experience? (Please describe) _____

Other prior performing arts experience? (Please describe) _____

Programs for Which You Are Requesting Assistance

Please list all applicable programs:

Class/Show/Camp: _____ Tuition: _____

Dates: _____ Enrolled? (y/n): _____

Class/Show/Camp: _____ Tuition: _____

Dates: _____ Enrolled? (y/n): _____

Class/Show/Camp: _____ Tuition: _____

Dates: _____ Enrolled? (y/n): _____

Ability to Pay

Parent/Guardian #1 Occupation: _____ FT/PT/Unemp: _____

Parent/Guardian #2 Occupation: _____ FT/PT/Unemp: _____

Total # Dependents in HH: _____ Household Contribution \$ _____

Single parent HH? YES NO YES NO

Please provide any additional context for request:

Scholarship amount requested:

Statement of Impact

Why do you want your child to experience Ovation Academy?:

What are your child's performing arts interests or goals?

How would a scholarship impact your family?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that false or misleading information in my application may result in cancellation of award.

Signature: _____

Date: _____

Please return via email as a PDF to:
teamovation@ovationacademy.org

Please use "Scholarship Application – YOUR LAST NAME" as Subject Line

Ovation Academy for the Performing Arts
Madison Street Theater
1010 Madison St
Oak Park, IL 60302