

NOCCA FOUNDATION'S 2024 SUMMER STUDY PROGRAM



SUMMER STUDY 2025

The NOCCA Foundation's Summer Study Student Support Program supports the arts training of NOCCA students at summer arts programs nationwide. Assistance covers tuition, room and board, and student travel costs only. Please note, the NOCCA Foundation cannot cover the entire cost of attending a summer program or guarantee assistance to every applicant. Applicants are responsible for a portion of the fees to attend their programs. Awards are based on documented financial need and merit and are paid

WHO AND WHEN:

ELIGIBILITY

Applicants must be current 10th or 11th grade returning NOCCA students in good standing. Graduating 12th-grade students will be considered only after the needs of 10th and 11th-grade students have been met.

DEADLINE: **Monday, March 31, 2025**

Complete applications, with all required documents, must be submitted to the NOCCA Foundation's office or mailbox in NOCCA's front office by the end of the day on March 31, 2025. Early submission is highly encouraged.

REQUIREMENTS CHECKLIST:

- ☐ **Filled Out Application Form.**
- ☐ **Total Household Income Documentation (for all working adults):**
 - If submitted at the start of the 2024/25 school year, no need to resubmit.
Acceptable documentation:
 - Copy of first two pages of parent/legal guardian's 2024 tax return, W2(s), or IRS Form 1099.
 - Copy of last two pay stubs (with pay period indicated).
 - Copy of child support documentation.
 - Copy of government assistance documentation (e.g., SNAP, WIC, Social Security

Note: Black out all Social Security Numbers.
- ☐ **Student Essay (typed or legibly handwritten):**
 - Describe yourself, your art, community activities, and why you wish to attend the chosen program.
- ☐ **Two Letters of Recommendation:**
 - From your Arts Department Chair and one other Arts faculty member. Applications without recommendations will not be considered.
 - Faculty already have forms for this but it is each applicant's responsibility to ask their faculty for a recommendation.
- ☐ **Program Information:**
 - Include details about the program(s) you are applying to.
- ☐ **Financial Aid Documentation:**
 - Proof that you have applied for financial aid from the program/university, or documentation that aid is not offered.
- ☐ **Optional Parent Letter:**
 - Parents may provide a letter detailing special circumstances (e.g., changes in income, family illness).

GUIDELINES:

1. Consider applying to a second program in case your first choice exceeds the combined support of the Foundation and family resources. **Awards will be granted for one program only.**
2. Award recipients must attend the program for which aid is requested. Changes require approval from the NOCCA Foundation and NOCCA faculty.
3. Notify the Foundation immediately if:
 - The summer program awards you a scholarship.
 - Additional funding sources reduce your attendance costs.
 - There is a cancellation or financial change to your program.
4. Students withdrawing after the Foundation has paid an award are responsible for reimbursing any unrecoverable funds.

**OFFICE USE ONLY:**

IH: _____

THI: _____

A: _____

SUMMER STUDY APPLICATION**STUDENT INFORMATION**

*Mark N/A for fields that do not apply.

Student Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Primary Phone Contact _____ Student's Preferred Email _____ Parish _____

Parent's/Legal Guardian's Name _____ Phone _____

Employer _____ Parent/Guardian Email _____

Parent's/Legal Guardian's Name _____ Phone _____

Employer _____ Parent/Guardian Email _____

How many in your household?(Include all dependent on the income of parent(s)/guardian(s)) _____

DISCIPLINE & LEVEL

DISCIPLINE (circle one):	Classical	Culinary Arts	Creative Writing	Media Arts	EntProdDesign	
	Drama	Dance	Vocal	Jazz	Musical Theatre	Visual Arts
LEVEL: (circle one)	I	II	III	IV	Intro	

ACADEMIC & ADDITIONAL INFORMATION

School Grade Level as of January 2025: _____

What is your sending school (if not NOCCA Academic Studio): _____

What letter grade did you receive for your last semester arts work at NOCCA? (A, B, C, etc.) _____

How long have you attended NOCCA? _____

Are you returning to NOCCA for the 2025-26 school year? (circle one) YES NO

Are you involved in any community activities or volunteer? If yes, where/how often? _____

PROGRAM INFORMATION (to list more than one program to which you are applying, print/copy this page again.)

Name of program you wish to attend: _____
Starting date of program and length (# of weeks): _____
Address (City, State, Zip): _____
Website and/or contact email address: _____
Phone number: _____
Have you been accepted? (circle one) yes not yet If not, when do you expect to hear back? _____
Does your program provide financial aid or scholarships? (circle one) yes no
Note: If your program provides financial aid or scholarship, you MUST apply
Have you applied yet (circle one)? yes no

FINANCIAL COST (Please fill in with accurate tuition information.)

- | | |
|--|-----------------|
| 1. Tuition for program you wish to attend | \$ _____ |
| 2. Room and board (if not included in tuition) | \$ _____ |
| 3. Travel costs (estimate, if necessary) | \$ _____ |
| A. TOTAL cost to attend the program (add lines 1,2&3) | \$ _____ |

The NOCCA Foundation cannot cover all costs of attending a summer program. You must provide the remaining funds from other sources. What other sources do you have and how much will be provided? Include any scholarships, financial aid from the summer program (amount received or anticipated/applied for), a part-time job, parent's/family help, etc.

<u>Other Source(s) of Funding</u>	<u>Amount</u>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
B. TOTAL of Other Sources :	\$ _____

TOTAL AMOUNT REQUESTED FROM NOCCA FOUNDATION	\$ _____
(Line A minus Line B) Total cost minus total other source funding	

List all summer programs (name and location) which you have attended since enrolling in NOCCA:

REQUIRED SIGNATURES

List the names of the two NOCCA arts faculty members you have requested recommendations from:

1. _____	2. _____
(Arts Chair)	(Arts Faculty)

I agree to all guidelines specified by the NOCCA Foundation Summer Study Student Support Program. I understand that receiving an award from the NOCCA Foundation does not assign any responsibility or liability to the NOCCA Foundation.

Student's signature _____ Date _____

Parent's/Guardian's signature _____ Date _____