



poB 456 | union | WV | 24983

## ARTS SCHOLARSHIP REPORT

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail (optional) \_\_\_\_\_

Instructor \_\_\_\_\_ Discipline \_\_\_\_\_

No. of lessons in previous quarter \_\_\_\_\_

No. of lessons missed \_\_\_\_\_

No. of lessons projected in next quarter \_\_\_\_\_

Total Cost previous quarter \$ \_\_\_\_\_ Next Quarter \$ \_\_\_\_\_

Scholarship Support previous quarter \$ \_\_\_\_\_ Next Quarter \$ \_\_\_\_\_

Content of Lessons to Date \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Rate your success:

Above Expectation \_\_\_\_ As expected \_\_\_\_ Below Expectation \_\_\_\_

What do you hope to accomplish in the next three months? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor Signature \_\_\_\_\_ Date \_\_\_\_\_