



FRSA 2025-2026

SUMMER ARTS EDUCATION SPONSORSHIP APPLICATION

The Friends of RSA is offering Summer Arts Education Sponsorships of up to \$250 each. Applications are open to **current** Freshmen, Sophomore's and Junior's in good academic standing (GPA of 2.5 or higher) who are returning to RSA for the 2025-2026 school year. These Sponsorships may be used for classes/lessons that would enrich your participation in the RSA Program.

The Application process: (All steps must be taken, or Application will not be

considered): ☐ Contact the school, studio or private instructor of your choice. Please be sure of your choice as there will be **no substitutions**. Take this Application to the instructor and have them complete the reverse side completely.

☐ Complete this form in its entirety after receiving their agreement to participate. **Please Print Clearly & Legibly.**

☐ Ask an **RSA teacher** to recommend you based on class performance. You must have a RSA teacher's recommendation – **no exceptions**.

☐ Your parent **must** sign this application – **no exceptions**.

☐ Attach printout of grades for the current school year from Atlas ONLY. – **no exceptions**.

☐ Your **completed** application packet is due in the RSA office or emailed to

friendsofrsa01@gmail.com no later than

*******4:00 pm on Friday, May 8, 2026-NO EXCEPTIONS*******

Summer Sponsorship recipients will be announced at the RSA Awards Assembly in May.

Please be advised: Sponsorships are awarded based on recommendations and academic merit. By accepting a Sponsorship, students agree to fulfill the terms of the Sponsorship as agreed to by the student and instructor/studio/school. If a student defaults on the terms of the Sponsorship, their **parents will be responsible for reimbursement** to FRSA and eligibility for next years Sponsorship may be terminated. Students may also be asked to write a follow-up report on their Summer Arts Experience.

Applicant Name: _____ Applicant Signature _____

Parent Name _____ Parent Signature: _____

Grade this year: 9th 10th 11th

Home Address: _____ Zip Code: _____

Phone: _____ Student Email: _____

Parent Phone: _____ Parent Phone _____

Area of interest for Summer Arts Study: _____

Briefly describe how you would benefit from summer arts study:

Teacher recommending this student (attach Recommendation): _____

--Over--

SUMMER ARTS EDUCATION SPONSORSHIP CONFIRMATION

To Be Completed By Private Teacher/Studio/School

By signing this form, I agree to give summer lessons to

_____, In the area of: (student's name) (Check one)

- ☐ Dance
- ☐ Art
- ☐ Voice
- ☐ Drama
- ☐ Instrumental Music
- ☐ Visual / Graphic Art
- ☐ Other _____

Cost is in the amount of \$ _____ for each Lesson / Session / Hour / ½ Hour
(Circle one)

Total Due \$ _____

Comments:

*****By accepting payment, I agree to provide the services described above. If student does not attend, all money will be returned to FRSA.*****

Payment of services will be mailed to the name and address listed below (please fill out completely and legibly):

Instructor/Studio/School Name: _____

Mailing Address: _____

Contact Name: _____ Signature: _____

Phone: _____ Email: _____

Please note: Student will receive letter from FRSA, if they receive scholarship, at the end of May. They will receive a letter that **MUST** be signed by you with an invoice attached, and returned by a specified date to receive payment. If easier you are welcome to email invoice to FRSA email: friendssofrsa01@gmail.com

If you have any questions please contact:

James Coleman, President, FRSA ph: 559-917-9402 friendssofrsa01@gmail.com
Brooke Archer, Director, RSA ph: 559-253-5324 fax: 559-253-5293

Dear _____

I am applying for a Summer Arts Education Sponsorship through Friends of RSA. Part of the application requirement is to get a teacher recommendation. My application will be **disallowed** if I do not have a recommendation, so I would greatly appreciate you completing this form and putting it in a sealed envelope before returning it to me as soon as possible so that I can include it in my application which is due by Friday May 8, 2026 at 4:00pm.

Sincerely,

Teacher Recommendation

Student Name: _____

Teacher Name/Signature:

*Please be Honest about the information we are looking for. We want to make sure that the students who receive sponsorships will benefit from them and utilize the time effectively. **This information will be kept confidential.** It will be reviewed only by the Summer Sponsorship Committee.*

*Please return this form to the student **in a sealed envelope no later than:** Wednesday, April 30, 2025. Please do not accept or complete any Recommendation forms after this date. It is up to you if student does not give to you in a timely manner, whether you want to complete or not.*

Please rate the student on a scale from 1(lowest) to 5(highest) in each category: Ex:
1-never, 2-rarely/seldom 3-sometimes/occasionally, 4-mostly/usually 5- Always/Excellent

Attendance/ Tardiness 1 2 3 4 5

Work Ethic 1 2 3 4 5

Accepts Responsibility 1 2 3 4 5

Ability to Work with Others 1 2 3 4 5

Self-Discipline 1 2 3 4 5

Overall Focus 1 2 3 4 5

Quality of Work 1 2 3 4 5

Comments:
