



SADM  
Professional Development Scholarship

NAME \_\_\_\_\_

NAME OF STUDIO \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL: \_\_\_\_\_

This scholarship will be awarded to a SADM member in good standing and a studio owner. The \$500.00 will be awarded as an investment in Studio Business or further your dance education.

In 100 words or less: Explain how you would use this money and why.  
(use back of sheet if necessary)

**\*\*winner will be notified and must be in attendance at the summer convention\*\***