



TAI CHI FOUNDATION

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Bernie Dushman Scholarship Fund

(Please Print or Type)

Application for TCF Sponsored Summer or Winter Training Scholarship

Training location: _____

Dates: _____

Name: _____

Email: _____

Tel/Cell # _____

Mailing Address: Street: _____

City: _____ State/Province: _____

Country: _____ Zip/country code: _____

Financial need information:

1. Number of dependents in your household*: _____

2. Adjusted gross income*: (Please enter row letter followed by \$, €, or £ from chart below) _____

(Continue to next page)

*For US residents please enter information from page 1 of most recently filed federal tax form 1040.

Gross Household Income:

<u>USD \$</u>	<u>Euros €</u>	<u>UK £</u>	ROW
<50,000	<55,000	<65,000	A
50,000-64,999	55,000-74,999	65,000-87,999	B
65,000-81,999	75,000-87,999	88,000-103,999	C
82,000-99,999	88,000-104,999	104,000-123,999	D
100,000-115,999	105,000-125,999	124,000-147,999	E
116,000-131,999	126,000-149,999	148,000-175,999	F
132,000-149,999	150,000-179,999	176,000-211,999	G
150,000-169,999	180,000-209,999	212,000-247,999	H
170,000 or more	210,000 or more	248,000 or more	I

Classes and/or apprenticeships that will be taken at the training:

Application Support letter requested from:

Name: _____

Email: _____

Signature of Applicant: _____

Date of this Application: _____

Please submit this form by email to administrator@taichifoundation.org

(Subject line: BDSF Scholarship Application) or by regular mail to:

Tai Chi Foundation
P.O. Box 575
Midtown Station
New York, New York 10018

End of Form

Rev 2/202



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(Please Print or Type)

Support Letter for Scholarship Application

(To be completed by certified TCF tai chi instructor or training coordinator)

This is a Support Letter for the application of:

Name (of applicant) _____

Date: _____

Training Location: _____

Training Date(s): _____

Classes/apprenticeships applicant will take at the training:

_____, or, don't know: _____

As of this date (from above) _____ has:

(Name of applicant)

Registered and paid tuition _____

Registered without tuition _____

Not registered _____

Other information for the scholarship committee to consider when evaluating this application:

This form completed by (name): _____

Signature: _____

Date: _____

Please submit this form by email to penny@taichifoundation.org (Subject line: BDSF Scholarship Application) or by regular mail to:

Tai Chi Foundation
P.O. Box 575
Midtown Station
New York, New York 10018

End of Letter of Intent for Scholarship Application

Rev. 02/2020