

FINANCIAL AID APPLICATION

Student Last Name: First Name:

In order for your application to be considered, you must complete and/ or submit the following:

- Completed Financial Aid Application signed and dated by parent
- Payment for all outstanding balances from prior seasons
- A copy of one or more of the following documents, if applicable:
 - Most recent Federal Income Tax Return (Form 1040, including all schedules, for both parents/guardians)
 - Letter from Social Welfare Agency stating amount of allotment
 - Official proof of Social Security income or survivor's pension
 - Official proof of unemployment compensation
 - Proof of other source of income (child support, maintenance or alimony)

Incomplete applications cannot be processed.

Recipient Obligations

1. Student co-payments must be made on time in order for financial aid to continue.

2. Students are expected to attend all scheduled lessons, classes, makeups and recitals in which they are scheduled to perform. The RI Phil Music School @ the United reserves the right to withdraw aid from students who do not comply with our attendance policy.

3. Aid will only be applied to the assignment/assignments presented in this application. Any assignment changes, including changes in instrument, lesson length, additional students and additional group assignments must be approved by the Music School Director and are not guaranteed.

4. If a reward of aid is approved, send back signed agreement to the Music School.

APPLICATION DEADLINE: We Accept applications at any time.

I, (please print name) , have read and understand these obligations. I understand that financial aid will only be considered if all required documents are included in my application. I hereby state that all of the information in this application is true and complete. I understand that the RI Phil Music School @ the United reserves the right to request additional verification of any information provided.

Signature:	Date:



Dear Applicant, Thank you for your interest in the RI Phil Music School @ the United Financial Aid Program. The school offers financial aid to students from birth to age 18 based on financial need. In order to be considered for financial aid, please complete and return this application form along with all the required documentation). Funds utilized for the Financial Aid Program come from **donors** who subsidize your child's music education. Donors have entrusted these funds to the school to assist motivated students who, for financial reasons, would otherwise be unable to study at the school. Financial aid is awarded based on the expectation that these funds will be used **responsibly** by the student/ family. Since the fund is dependent on donor contributions, the pool of monies available for students fluctuates from year to year. As a result, the percentage of support awarded to your child may change from one year to the next. The amount of financial aid is determined by a sliding scale, which takes into account household size and income. Please understand that the school does not award full scholarships. In general, the range of financial aid awards will be between 10% and 75% of the total tuition for those who qualify. Please take this into consideration when deciding what activity/activities you will pursue.

Sincerely, The Financial Aid Committee

SECTION I: Personal Information

1. Student's Name	Date of Birth		Grade
Enrollment Status: New Student Returning Instrument/Class Lesson Length: 30 minutes		her	
Lesson Length: 30 minutes	45 minutes 60 minutes O	other:	
Our funders require us to report the eth below that you feel best describes you: ☐Hispanic/Latino/a ☐Multiracial ☐ White ☐	African American/Blac	ck 🛯 American Indian/A	laska Native 🛯 Asian 🌔
2. Student's Name	Date of Birth		Grade
Enrollment Status: New Student Returning Instrument/Class Lesson Length: 30 minutes		her	
Lesson Length: 30 minutes	45 minutes 60 minutes O	other:	
Asian □Hispanic/Latino/a □Multiracial □ V 3. Student's Name			
Enrollment Status: New Student Returning			
Instrument/Class Lesson Length: 30 minutes	leac	her	
Our funders require us to report the eth box(es) below that you feel best describ Asian Hispanic/Latino/a Multiracial V	nicity of students in ou bes you:	r program. Optional: I ican/Black American	Indian/Alaska Native 🗅
Address	City	State_	Zip
Cell or Home Phone	Email	L	
Parent/Guardian Name	Employer	Wo	rk Phone
Parent/Guardian Name	Employer	Wo	rk Phone
Parents are: TogetherSeparated	_DivorcedSing	leStudent live	es with



SECTION II: Financial Information

Please complete all entries. If not applicable, please mark N/A.

<u>REQUIRED</u>: In order to assess financial aid eligibility, please provide the following:

Number of members in your immediate family: Adults______ Children_____

For the purposes of income verification, I have **attached** a copy of one or more of the following documents, if applicable:

___Most recent Federal Income Tax Return (Form 1040, including all schedules for **both**

parents/guardians)

__Letter from Social Welfare Agency stating amount of allotment

__Official proof of Social Security income or survivor's pension

__Official proof of unemployment compensation

Proof of other source of income (child support, maintenance or alimony)

Parent/Guardian #1 total yearly Adjusted Gross Income: \$_____

Parent/Guardian #2 total yearly Adjusted Gross Income: \$_____

REQUIRED: Household income from all other sources

Туре	Dollar amount	How often?				
Rental Income		Annual or	_Monthly			
Retirement		Annual or	_Monthly			
Social Security		Annual or	_Monthly			
Unemployment	t	Annual or	_Monthly			
Alimony		Annual or	_Monthly			
Child Support		Annual or	_Monthly			
Investment Inc	ome	Annual or	_Monthly			
Other income _		Annual or	_Monthly			
Total Income						
REQUIRED: Monthly Household Expenses						
Rent/Mortgage		Day Care				
Alimony Payme	ents	Student Loan				
Child Support F	Payments	Real Estate Taxes_				
Car Payment _						
Medical Expenses		Other (Explain)				
Total Expenses						



REQUIRED: Additional Financial Information

1. Does your child receive free meals at school? _____ Are you eligible for food stamps/SNAP? _____

2. Can you pay 75% of the tuition? ______ 3. If not, what is the amount you can afford per week? ______

Are there any other compelling financial circumstances to consider? Below, please provide some narration of your current situation – it is very helpful to provide us with a full understanding of what is going on in your family.