

INCOME INFORMATION:

Net Monthly Income \$ _____ Net Annual Income (all sources) \$ _____

Are you currently receiving any form of public assistance? Yes No
Does your child receive financial aid from his/her school? Yes No
Does your child receive financial aid from any other extra-curricular activity? Yes No

EXPENSE INFORMATION:

Monthly Rent/Mortgage \$ _____

Monthly Living Expenses \$ _____

Other Expenses (List any other large expenses.) \$ _____

Total Monthly Expenses \$ _____

How many children live at home? _____

What are their ages? _____

Any other relevant information that you would like to include:

*****How much tuition are you able to pay? \$ _____ *****
(Monthly payment plans are available)

With this application, please submit a copy of parent/guardian's W-2 (for both adults if applicable) for the previous calendar year or copy of parent/guardian's pay stub for the previous month.

I do hereby certify that, to the best of my knowledge, all of the information furnished on this form is complete and accurate. All information is considered confidential; however, I give my authorization to verify information.

Signature Date

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OFFICE USE

TOTAL TUITION \$ _____ FINANCIAL ASSIST. \$ _____ BALANCE DUE \$ _____

MUSICAL THEATRE WORKS

-FINANCIAL ASSISTANCE/SCHOLARSHIP APPLICATION-

In order to be considered for financial assistance, we must have all of the following information as soon as possible. Incomplete forms cannot be processed.

DATE OF APPLICATION: _____

STUDENT INFORMATION:

Name

Address

City

Zip

Phone

Birth Date

Age

School

Grade

PARENT INFORMATION: FAMILY EMAIL ADDRESS: _____
(PLEASE PRINT CLEARLY)

1. Parent/Guardian's Name _____ Phone _____ SS# _____

Employer _____ Address _____ Phone _____

Hours per week/Month _____

2. Parent/Guardian's Name _____ Phone _____ SS# _____

Employer _____ Address _____ Phone _____

Hours per week/Month _____

(CONTINUED>>>>>>>>>>)