

Four Strings Academy- 2019 Financial Aid Application

I. Personal Information

Camper's General Information

NAME (LAST, FIRST, MIDDLE INITIALS)		
BIRTH DATE (MM/DD/YY)	AGE	INSTRUMENT OF CHOICE: (VIOLIN, VIOLA, CELLO, BASS HARP)
STREET ADDRESS	CITY, STATE, ZIP	HOME PHONE (XXX-XXX-XXXX)
DO YOU ALREADY PLAY AN INSTRUMENT? _____ IF YES, WHAT INSTRUMENT DO YOU PLAY? _____	HOW MANY YEARS HAVE YOU PLAYED YOUR LISTED INSTRUMENT? _____	
DOES CAMPER LIVE WITH: ____ BOTH PARENTS ____ FATHER ____ MOTHER ____ LEGAL GUARDIAN	HOW DID YOU HEAR ABOUT FOUR STRINGS ACADEMY? _____	

Parent/Guardian Information

MOTHER'S FULL NAME			
STREET NAME & NUMBER		CITY/PROVINCE	POSTAL CODE
HOME PHONE	WORK PHONE	EXTENSION	CELL/PAGER
EMPLOYER NAME & LOCATION			PRIMARY EMAIL ADDRESS
FATHER'S FULL NAME			
STREET NAME & NUMBER		CITY/PROVINCE	POSTAL CODE
HOME PHONE	WORK PHONE	EXTENSION	CELL/PAGER
EMPLOYER NAME & LOCATION			PRIMARY EMAIL ADDRESS
PARENT'S MARITAL STATUS: <input checked="" type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> legally separated <input type="checkbox"/> widowed			

-If divorced, who is the custodial parent? _____

SCHOOL Information:

SCHOOL NAME:		<input type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> homeschool
BIRTH DATE (MM/DD/YY)	CURRENT GRADE:	
SCHOOL ADDRESS	CITY, STATE, ZIP	HOME PHONE (XXX-XXX-XXXX)

II. Income Information

(Please state income in total dollar annual amounts.)

• If legally separated, both parents' income must be reported.

- | | |
|---|------------------------------|
| 1. Annual income of male parent or guardian (wages, salaries, tips) | \$ Click here to enter text. |
| 2. Annual income of female parent or guardian (wages, salaries, tips) | \$ Click here to enter text. |
| 3. Annual business income | \$ Click here to enter text. |
| 4. Other taxable income (specify: pensions, capital gains, etc.): | \$ Click here to enter text. |
| 5. Annual alimony or child support | \$ Click here to enter text. |
| 6. Annual allotment of food stamps | \$ Click here to enter text. |
| 7. Annual TANF | \$ Click here to enter text. |
| 10. Other nontaxable income (specify source): _____ | \$ Click here to enter text. |
| Total Annual Income (Add lines 1-10) TOTAL | \$ Click here to enter text. |

III. Additional Financial Information

Monthly rental payment or mortgage? \$ Click here to enter text.

Total # of dependent children in household: Click here to enter text.

What is the approximate amount the family can contribute toward tuition for summer camp? \$ Click here to enter text.

What is the approximate amount the family requests toward tuition for summer camp? \$ Click here to enter text.

Have you contacted any other funding sources in your community? _____

Please list the names of those people or organizations and the amount, if any, they have pledged.

IV. Program Selection

Below select (X) the program with which you are interested. If there is more than one session, please rank in order of preference (1- first choice, 2 – second choice, 3 – third choice).

Day campers attend M-F, approximately 9am – 4pm.

☐ _____ **Session I** : July 8th – July 19th

☐ _____ **Session II**: July 22nd – August 2nd

☐ _____ **Session I and II**: July 8th – August 2nd

V. Certification

I certify that the information furnished on this form is complete and accurate to the best of my knowledge.

Signature of Parent/Guardian

Print Name

Relationship to Student

Date

Required Documents and Financial Need Statement

- Copy of 2018 Completed Income Tax form
- A Letter stating your need and any relevant information concerning your financial needs.

[illegible]