



FLORIDA SYMPHONY
YOUTH ORCHESTRAS
HANRICH CLAASSEN, MUSIC DIRECTOR

Financial Aid Application

All information is confidential. Please read carefully and complete each section.

Florida Symphony Youth Orchestras is a non-profit organization, and tuition provides one third of our operating budget. Contingent upon availability of resources, Florida Symphony Youth Orchestras strives to provide financial aid for applicants who are truly in need, and would otherwise be unable to participate. A flexible monthly payment plan is also available, in lieu of a scholarship.

Please note that all families are expected to pay a portion of the membership fee, as there are no full scholarships available.

Please complete the application below and return to FSYO via mail at PO Box 2328 Winter Park FL, 32790, or by scanning and emailing to exec@fsyo.org. Please submit one application per child.

Section 1: Program Information:

Student's Name:

Instrument:

Student's Orchestra: _____

Requested scholarship amount: \$ _____

Were you a member of our program last season? (please circle) Yes No

Section 2: Financial Information:

Number of Household Members:

Adults

Children

Your gross annual family income is approximately: (please circle)

Under \$12,000

\$12,000 to \$20,000

\$20,001 to \$28,000

\$28,001 to \$36,000

\$36,001 to \$44,000

\$44,001 to \$52,000

\$52,001 to \$60,000

Over \$60,000

This year's estimated income \$

Section 3: Additional Information to be considered (required)

Please use this space to describe other factors impacting your financial situation that may assist us in understanding your need for tuition assistance. Please use the back of this form if needed.

Section 4: Personal Reference (not a relative)

Name: _____

Mailing Address: _____

Daytime Phone: _____ Alternate Phone: _____

Email address: _____

Section 5: 1040 Form from 2016 Tax Return

Please attach a copy of the first two pages of your 1040 from your personal tax return for 2016; if you filed an extension, please attach a copy of the extension along with the first two pages of your 1040 for 2015. *Your federal tax forms will be shredded after processing, or will be returned if you provide a self-addressed, stamped envelope for that purpose.*

Section 6: Acknowledgement Letter

If the member listed in this application is awarded financial aid, the member is expected to write a personal note to the organization, acknowledging the award and deliver it to the Executive Director within 2 weeks of confirmation of aid. Thank you letters will be used as support documents in applying for grants to continue our financial aid program.

Section 7: Signatures

We have answered all of the above questions to the best of our ability, and we believe them to be correct. We affirm that, without the aid requested above, it would be a struggle financially to enroll my (OUR) child in this program.

Parent/Guardian 1 signature

Date

Parent/Guardian 2 signature

Date

Signature of member

Date