

Financial Aid Form

Financial assistance is available for all programs. Awards are made on a sliding scale and based on information requested below. Please complete one form per child. All information is held in complete confidence. Please submit a recent tax return to be considered for financial assistance. **Return completed form along with the latest tax return to:** School of the Performing Arts, 432 State Street, Schenectady, NY 12305. You may also email the form to mgatzendorfer@proctors.org , gjaniszewski@proctors.org or kstephens@proctors.org.

Name of Student: _____ Phone Number: () _____

School: _____ Grade: _____ E-mail Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian's Name: _____

Contact Phone Number: () _____ Work Phone Number: () _____

Occupation(s): _____ Place(s) of Employment: _____

Total Number of People in Household (please check one):
 ___ 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8+ Number of adults: _____ Number of Children: _____

Total Annual Household Income (please check one):
 ___ Below \$10,000 ___ \$10,000-\$20,000 ___ \$20,001-\$30,000 ___ \$30,001-\$40,000
 ___ \$40,001-\$50,000 ___ \$50,001-\$60,000 ___ \$60,001-\$70,000 ___ \$70,001-\$80,000 ___ \$80,001 +

Please indicate all sources of income:
 ___ Child Support ___ Disability ___ Salaries ___ Social Security ___ Other: _____

Please explain any unusual family expenses (medical, unemployment, death, emergency situations, etc.):

What was the last School of the Performing Arts program your child participated in? _____

Was your child previously awarded any financial assistance for our programs? ___ Yes ___ No

Program applying for: _____

Amount of program tuition: \$ _____

How much of the tuition can your family pay? \$ _____
Balance (Financial Assistance Requested): \$ _____

Signature of Person Submitting Form _____ Date Do Not Write Below This
Line

Office use only:

Date: _____ Int: _____
Balance (Financial Assistance Requested): \$ _____

Signature of Person Submitting Form _____ Date Do Not Write
Below This Line

Office use only:

Date: _____ Int: _____