

Fox Valley Youth Orchestra Ensembles Financial Aid Application

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

The Fox Valley Youth Orchestra is a non-profit organization, and tuition provides just a portion of our operating budget. Contingent upon availability of resources, the Fox Valley Youth Orchestra strives to provide financial aid for applicants who are truly in need, and would otherwise be unable to participate.

Please complete the application below and return to the FVYO via mail at PO Box 2138, Aurora IL 60507, or by scanning and emailing to info@fvyouthorchestra.org. Please submit one application per child.

Section 1: Program Information:

Student's Name: _____ Instrument: _____

Student's Ensemble(s): _____

Requested scholarship amount: \$ _____

Section 2: Financial Information:

Number of Household Members: _____ Adults _____ Children

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

Under \$12,000 \$12,000 - \$20,000 \$20,001 - \$28,000 \$28,001 - \$36,000 \$36,001 - \$44,000

\$44,001 - \$52,000 \$52,001 - \$60,000 Over \$60,000 This year's estimated income \$ _____

Is your child currently on reduced or free lunch program at school: (please circle) Free Reduce Not Applicable

Total monthly expenses (mortgage/rent, utilities, property taxes, home insurance, food, auto loan, gasoline, health insurance, medical expenses, child support, etc.): \$ _____

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 2014 Tax Return

Please attach a copy of the first page of your 1040 from your personal tax return for the previous year; if you filed an extension, please attach a copy of the extension along with the first page of your 1040 for the prior year. *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.

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** _____