

**Richmond Symphony & VCU  
Orchestra Project  
Confidential Application for Tuition Support**

**STUDENT INFORMATION** (Check all that apply)     new student     returning student     I have received previous tuition support

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Race (optional) \_\_\_\_\_

School (Present or rising) \_\_\_\_\_ Grade (present or rising) \_\_\_\_\_

Phone (home) \_\_\_\_\_ (other) \_\_\_\_\_

Email \_\_\_\_\_

Ensemble \_\_\_\_\_ Tuition \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Name \_\_\_\_\_ Employer \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (other) \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone \_\_\_\_\_

How did you hear about Orchestra Project? Friend – name: \_\_\_\_\_

Private Music Teacher – name: \_\_\_\_\_

School Teacher – name: \_\_\_\_\_

Other: \_\_\_\_\_

1. What is the Adjusted Gross Income of the person who, for income tax purposes, claims the student listed on this form as a dependant? Amount: \$ \_\_\_\_\_

2. What are the total wages of the other parent / guardian? Amount: \$ \_\_\_\_\_

3. Do you receive any other allotment of monies from agencies representing:

Aid to Families with Dependent Children	Amount: \$ _____
NC Public Aid: Monthly/Food Stamps/Wic	Amount: \$ _____
Alimony and/or child support	Amount: \$ _____
Social Security	Amount: \$ _____
Other income (retirement, disability, etc.)	Amount: \$ _____

5. Please indicate the total number of children or dependents within your household: \_\_\_\_\_

6. Enclose a photocopy of your latest income tax return and a current pay stub for all wage earners in the family OR any other acceptable proof of annual income.

7. If extenuating circumstances occurred in the past year that hinder your ability to pay tuition in full, you may attach written documentation in support of these claims. Enclose a letter on a separate piece of paper describing any other information you would like to be brought to the attention of the Tuition Support Committee. Please write a short statement that explains why taking the indicated class is important to your child.

**Required:** I understand that tuition support may be withdrawn from any student who does not maintain a record of cooperation and achievement satisfactory to the Orchestra Project. I understand that tuition support is granted for instruction for the summer only. I understand that providing false or misleading information on any part of this application will disqualify me from any current or future tuition support from the Orchestra Project.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Parent/Guardian or Adult Student)

*Please note that Financial Assistance cannot be granted if this application is incomplete.  
Application deadline is May 1, 2009.*