

**Greensboro Symphony Youth Orchestra Program
Financial Need-Based Scholarship Application**

Student Name: _____

Instrument: _____

Phone: _____

Email: _____

Street Address: _____

City, State, ZIP: _____

Grade: _____

School: _____

The Greensboro Symphony Youth Orchestra Program understands that the following section requires sensitive information. This information will be used only for purposes related to evaluating the request for financial assistance. This form cannot be processed unless all information is complete and the form is signed.

Tuition for the 2016-17 season is \$250 for Youth Orchestra and Repertory Strings, and \$200 for Youth Philharmonic, Youth Camerata, and Junior Philharmonic.

Could you participate if you did not receive any scholarships? _____

What amount, if any, could your family contribute to tuition? \$ _____

Could you pay tuition if it was divided into two installments? _____

Yearly household income (from all earners; before taxes): \$ _____

How many adults in the family are currently working full time? _____

How many family members live at home? _____

Are you currently receiving scholarships or awards for music lessons from any other organization?
_____ If yes, from whom? _____

How many children in your family 18 or under currently study music? _____

How many family members are current members of the GSYO Program? _____

Please explain any special circumstances or financial obligations that affect your ability to pay tuition - for example, loss of employment or extensive medical bills. Use the back of this form if necessary.

Student Signature _____ Date: _____

Parent Signature _____ Date: _____