

Church Street School For Music And Art

Financial Aid Guidelines

The following information is provided to assist students, parents and faculty members in understanding the financial aid policies of the Church Street School for Music and Art. It should be understood that current funding for financial assistance through CSSMA remains somewhat limited. Every effort will, however, be made to assist those meritorious students who, because of financial difficulties, would otherwise be unable to study at CSSMA.

Financial Aid Award Policies

Applications for financial aid must be submitted not later than July 1st for the Fall Semester or December 1st for the Spring Semester.

Any aid received is applied on a per class or per lesson basis, and is not given to the student in the form of cash. In the case of lessons, if there is a reduction in the length of lesson time, the award will be decreased accordingly. Any increase in lesson time during the year will not necessarily result in a proportionate increase in the award. Unused financial aid may not be carried over to a subsequent enrollment period.

The acceptance of financial assistance from CSSMA carries with it an obligation on the part of the student to attend classes or lessons on a regular basis and work diligently on making progress in his/her principal area of study. Financial aid may be withdrawn at any time if, in the opinion of the principal teacher and the Director of CSSMA, the recipient fails to meet the minimum standards that are expected by the teacher and CSSMA. The receipt of aid does not guarantee assistance in the future.

As appropriate, recipients of financial aid may be asked to perform on behalf of CSSMA, or may be requested to assist with School activities or events.

A parent or guardian of each financial aid recipient will be asked to sign a letter of agreement accepting the financial aid and to return it within two weeks of notification of the award.

CSSMA is committed to providing assistance to those meritorious students who might otherwise be unable to study at the School. Limitations in the amount of aid available may mean that not every student with a demonstrated need can be helped. There are no 100% awards made to any student.

- *It is important that any additional information that might affect the decision of the School to grant aid be detailed as part of the application. Such information might include unusual medical expenses or expenses for education. Please document such expenses.*
- *Additional verification of financial information may be required.*
- *All information submitted will be kept in strict confidence.*
- *CSSMA does not discriminate on the basis of race, color, nationality, sex, ethnic origin or religious beliefs in its admissions, financial aid, scholarship and other educational policies.*

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Financial Aid Application

Applicants for financial aid are required to complete this form and provide the requested attachments. Aid is awarded based on a combination of need and merit. A student audition and/or interview may be required, at the discretion of the Scholarship Committee.

Student Information

Name of Student: _____ Birthdate: ____/____/____

Home Address: _____

Phone: _____

Class(es) for Which Financial Aid is Sought: _____

Semester/Year: Fall _____ Spring _____

If Private Instrumental:

Instrument: _____ Proposed Lesson Length: _____

Years of Study: _____ Instructor: _____

Parent or Guardian Information

Father's Name: _____

Home Address (if different than Student): _____

Occupation: _____

Employer's Name and Address: _____

Business Phone: _____

Mother's Name: _____

Home Address (if different than Student): _____

Occupation: _____

Employer's Name and Address: _____

Business Phone: _____

Financial Information (please provide estimate gross annual income figures for current year)

Father: \$ _____ Mother: \$ _____

Miscellaneous Income: \$ _____ Total Gross Income: \$ _____

Number of people supported with this income: _____

Describe any unusual expenses that might help determine need on a separate page.

Scholarship Aid

Amount of Scholarship Aid requested (choose one): \$ _____ or _____ % of total

Attachments

- Teacher Recommendation Form
- If income has changed dramatically or you wish to present any additional information that may assist us in evaluating your financial situation, please attach narrative

Verification

I declare that I have completed this form, and to the best of my knowledge I believe it to be true, correct and complete.

Signature of Parent or Guardian

Date

