

PARENT FINANCIAL STATEMENT

This page is to be completed by the student's parent.

Student name _____ Age _____
Home Address _____
City _____ Zip _____ Home phone _____
Grade entering fall 2016 _____ School _____
Instrument _____ Total length of study _____
Mother's name _____ Occupation _____
Father's name _____ Occupation _____
Number of other children or other dependents in the family _____ Ages _____

Check range of total family income per year, before taxes:

<input type="checkbox"/> Under \$20,000	<input type="checkbox"/> \$20,000 - \$30,000	<input type="checkbox"/> \$30,000 - \$40,000
<input type="checkbox"/> \$40,000 - \$50,000	<input type="checkbox"/> \$50,000 - \$60,000	<input type="checkbox"/> \$60,000 - \$70,000
<input type="checkbox"/> \$70,000 - \$80,000	<input type="checkbox"/> \$80,000 - \$90,000	<input type="checkbox"/> above \$90,000

Please provide *reasons of financial need* for applying for this scholarship. Please avoid using your child's name (or teacher's name) except in required blank (refer to student as he/she, student, my child, etc.).

Parent signature _____ Date _____

Application deadline is June 1, 2016