



Please complete both sides of this application. Incomplete applications will not be reviewed. Please type or print legibly.

Student Information

New Financial Aid Application Returning Financial Aid Applicant Male Female

Student Name _____ Birthdate _____

Mailing Address _____ City/State _____ Zip _____

Student lives with Mother Father Both Other _____

Academic School _____ Grade _____

Parent/Guardian Name _____ Relationship _____

Home Telephone _____ Work _____ Cell _____

E-mail (home) _____ E-mail (work) _____

Place of Employment _____ Position _____

Parent/Guardian 2 Name _____ Relationship _____

Place of Employment _____ Position _____

Address (if different from above) _____ City/State _____ Zip _____

Home Telephone _____ Work _____ Cell _____

Class / Lesson Information

Class, program or instrument studied at Academy _____

Has your child ever taken lessons or classes at Lawrence Academy of Music?	____ Yes ____ No
Has your child ever received financial assistance from Lawrence Academy of Music?	____ Yes ____ No
Does your child participate in music classes at a school, business, or institution other than Lawrence Academy of Music? If so, please list school or institution and courses:	____ Yes ____ No
What is the total number of individuals within your household including yourself, for whom you are financially responsible?	

Please complete page 2 →



<p>If your child is applying for financial aid to enroll in individual lessons, please indicate the total amount you are able to pay for one full 16-week semester of individual lessons. Do not leave this field blank.</p>	\$
<p>If your child is applying for financial aid to enroll in a class or ensemble, please indicate the total amount you are able to pay for a class or ensemble. Do not leave this field blank.</p>	\$
<p>What is the annual adjusted gross include of the person(s) who, on their income taxes, claims as a dependent the student listed on this form? <i>(Line 37 on form 1040, line 21 on form 1040A or line 4 on form 1040EZ)?</i> If you did not file taxes this year, please indicate your total yearly household income.</p>	\$
<p>Do you receive any other income to support the child for whom you are requesting financial aid? If so, please indicate below the dollar amount you receive on a monthly basis and check the appropriate sources below:</p> <p> <input type="checkbox"/> Social Security <input type="checkbox"/> Disability <input type="checkbox"/> Unemployment <input type="checkbox"/> Food stamps <input type="checkbox"/> Child support <input type="checkbox"/> Welfare/public aid <input type="checkbox"/> Other _____ </p>	\$

The financial aid committee will also take into consideration any special circumstances regarding your current family or financial situation. Please add any comments below that you feel would be important for the financial aid committee to consider when reviewing your application. If you need more room, feel free to include a separate letter with your application.

My/our signature(s) below guarantee that all of the information submitted is true and correct.

Signature(s) of Parent(s) / Guardian(s)

_____ Date _____

_____ Date _____

Submit completed form with a copy of your most recent Federal tax form 1040 to:
Fred Snyder, director
Lawrence Academy of Music
P.O. Box 599
Appleton WI 54912-0599