MARROWSTONE in the CITY 2010

FINANCIAL AID APPLICATION

(Please complete an application for each student in need of funds)

Name: _____ _____
last **first** **middle** **Instrument**

Session Attending:_____

Applicant Resides with: _____

Number of Children in Family: _____ Ages: _____

Have you participated in any SYSO programs? Yes No Which?_____
If yes, have you applied for financial aid before? Yes No Previous Award_____

What is the maximum of the $425 tuition you can pay?_____

Father or Guardian _____ Home address_____

Home Phone: _____Nature of Business_____ Employer_____

Gross annual earnings_____

Mother or Guardian_____ Home address_____

Home Phone: _____Nature of Business_____ Employer_____

Gross annual earnings_____

Person responsible for payment:_____ **Relation:**_____
Savings and Checking account balances:_____ **Real Estate Values:**_____
2009 Gross Income_____**Other Investments**_____

Please describe any extraordinary educational expenses for dependents:_____

_____

Funds are limited. Please explain your reasons for needing financial assistance in enough detail to permit effective and fair evaluation of your individual situation. Feel free to use the back of this form or a separate sheet of paper.

_____

_____

_____

Parent /Guardian Signature_____ **Date:**_____