

WESTMINSTER CONSERVATORY OF MUSIC
CONFIDENTIAL FINANCIAL ASSISTANCE APPLICATION
For Summer Music Camps

Westminster Conservatory has limited funds available for financial assistance to students in Summer Camps. The following information will be held in confidence and will be used only for the purpose of determining financial needs. If you have any questions or concerns regarding this application, please contact the Conservatory Office at (609) 921-7104. We are pleased that you have chosen Westminster Conservatory for your summer music camp needs.

Date of Application _____

1. Name of Student _____

Home Address _____

Home Phone _____ Work Phone _____

Applicant's Email _____

2. Are you currently a Conservatory student? Yes No

3. Have you requested financial aid in the past? Yes No

4. Summer Camp applying for _____ Date/Location _____

5. Cost of Summer Camps for all family members: \$ _____

Amount you can afford to pay toward the tuition: \$ _____

Total Financial Aid Requested: \$ _____

6. Family Information –

Father's Name _____

Father's Employer _____ Annual Salary \$ _____

Father's Email _____

Mother's Name _____

Mother's Employer _____ Annual Salary \$ _____

Mother's Email _____

ANNUAL INCOME FROM ADDITIONAL SOURCES: (Veteran's or Social Security Benefits, income from other working children, etc.)

\$ _____

Total Annual Family Income \$ _____

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IF APPLICABLE:

Welfare Number _____ Amount Received Monthly \$ _____

Welfare Center Location _____

Number of Persons supported by above income _____

7. We understand that every family has unique responsibilities and expenses. Please list your fixed monthly expenses (rent, mortgages, utilities, loans, insurance payments, etc.) and then any additional expenses that would affect your ability to pay tuition. Please indicate if these additional expenses are yearly, monthly, etc.

8. I certify that the above information is accurate to the best of my knowledge.

Signature of Parent _____ Date _____