



THE CONSERVATORY TUITION ASSISTANCE FORM FOR MUSIC THERAPY

Application Process and Eligibility

Partial applications will not be considered. Please read all eligibility and policy information before submitting your application. The Conservatory complies with all applicable federal, state, and local laws governing non discrimination in its activities and operations. Although Tuition Assistance is limited and amounts vary each year, The Conservatory will make every effort to assist those students who, because of financial difficulties, would otherwise be unable to study at The Conservatory.

1. Students enrolling through our Advance Registration process must have completed applications submitted no later than June 15th. Students enrolling after the Advance Registration process are still encouraged to apply for tuition assistance. Assistance is awarded based on fundraising efforts of The Conservatory and the amount of funds available may vary from year to year. Once the funds for the year have been used, tuition assistance for the year will be closed.
2. Families that receive assistance are expected to attend their regular sessions and observe all Conservatory student policies. In some cases, The Conservatory reserves the right to revoke any assistance given to families when students have missed sessions beyond the stated policies. In this event, the parent/caregiver is responsible for the remaining balance of the year and is subject to all Conservatory payment policies.
3. Students who qualify for tuition assistance do not receive any additional registration discounts in combination with the tuition assistance.
4. Registration fees are paid in full and are not part of the assistance.
5. Submit:
 - a. Application
 - b. Proof of Income – accepted documents: Form 1040, 1040-A, or 1040 EZ and/or a letter from Social Service Agency, Social Security Administration, Unemployment Office or other documentation of income
6. The amount of aid awarded to an individual or family is based on household income and number of Conservatory students in the household (with a maximum of 3).
7. Tuition Assistance is not guaranteed to all applicants and when awarded does not pay in full for sessions. Tuition assistance is not awarded for camps or classes. Tuition Assistance awards will result in a tuition fee reduction between 10% - 60%.
8. Applicants may apply assistance to only 1 registration per household student per year.
9. Allow at least 3 weeks for processing.
10. You will receive a letter by email notifying you of your qualifying status. Assistance will be granted for the current school year and following summer.
11. Any questions please contact Rachael Gallagher, Executive Director at 215-340-7979.
12. Forms and additional documents can be dropped off at the Front Desk or can be mailed to *The Conservatory, 4059 Skyron Drive, Doylestown, PA 18902, Attn: Rachael Gallagher.*

Tuition Assistance Award Policies

The Conservatory award policies help ensure our tuition assistance program is administered as fairly and consistently as possible. Thank you for your attention to these important policies.

- Tuition Assistance recipients may be on a monthly payment plan. Failure to make payments in a timely manner will result in termination of Tuition Assistance. All other Payment Policies apply.
- Assistance received is applied as a tuition discount and is not given to the student in the form of cash.
- If there is a reduction in the length of lesson time or the number of lessons, the award will be reduced accordingly. Any increase in lesson time or number of lessons will not necessarily result in a proportionate increase in the award.
- A student who withdraws prior to the completion of the term will not receive assistance on the 5 lesson withdraw fee.
- Recipients must reapply annually. Receiving prior assistance does not guarantee future assistance.

I have read and understand the above award policies and information.

Signature _____ Date _____

Please print legibly. Complete this application in full.

PARENT/GUARDIAN INFORMATION

Marital Status of Parents: _____ Single _____ Married _____ Separated _____ Divorced _____ Widowed

Mother's Name/Guardian Name #1 _____

Address _____

City _____ State _____ Zip Code _____

Day Phone _____ Evening Phone _____

Employer's Name _____ Employer's Phone _____

Occupation _____

Father's Name/Guardian #2 _____

Address (if different from mother/Guardian #1) _____

City _____ State _____ Zip Code _____

Day Phone _____ Evening Phone _____

Employer's Name _____ Employer's Phone _____

Occupation _____

Reason Requesting Financial Assistance:

List yourself and all members of your family who currently live with you. Indicate if you are requesting assistance for them

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

_____ Age _____ Birth Date _____ Requesting Assistance Yes ___ No ___

Does the music therapy student collect income through Social Security or another program? ___ Yes ___ No
If YES please provide three most recent income statements.

Does the music therapy student live at home or at a care facility? _____

Does the music therapy student have an aide? ____ Yes ____ No

Will the aide be responsible for bringing the student to the music therapy lessons? ____ Yes ____ No

Please provide name, phone number and email address for the aide: _____

HOUSEHOLD INFORMATION

<p>List all sources of MONTHLY income</p> <p>Gross Wages/Salary _____ Attach three, most recent and consecutive paystubs and Form 1040, 1040-A, or 1040 EZ and/or a letter from Social Service Agency, Social Security Administration, Unemployment Office or other documentation of income</p> <p>Child Support/Alimony _____ Attach current child support/alimony document</p> <p>Disability/Social Security _____ Attach current social security, or disability statement</p> <p>Unemployment Comp _____ Attach Unemployment Determination Document</p> <p>Student monthly income _____</p> <p>Other _____ Attach Supporting documentation</p> <p>Total Gross Monthly Income \$ _____</p> <p>**Support documentation is required before processing can start.</p>	<p>List all sources of MONTHLY expenses:</p> <p>Rent or Mortgage _____</p> <p>Child Support/Alimony _____</p> <p>Medical Bills _____</p> <p>Student Loans _____</p> <p>Other _____</p> <p>Total Monthly Expenses \$ _____</p>
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Additional Information:

What is the total monthly expense for your dependent with a disability? \$ _____

Are there any other circumstances you would like us to know? _____

I agree to cooperate with the Conservatory Office in keeping all payments current. I certify that the information provided above is complete and accurate.

Parent/Guardian Signature

Date