



4059 Skyron Drive, Doylestown, PA 18902
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APPLICATION FORM MUSIC THERAPY TUITION ASSISTANCE GRANT

General Information

(Please read carefully before completing application.)

ELIGIBILITY

Financial assistance for private lesson tuition is available to qualifying Adult Music Therapy applicants. Parent(s) or legal guardian(s) must provide a complete picture of the household's financial situation by supplying all required documents. Incomplete applications without the required documents will not be considered. The Conservatory complies with all applicable federal, State, and local laws governing non-discrimination in its activities and operations.

APPLICATIONS

Applications are accepted on a rolling basis throughout the year. TAG is not guaranteed to all applicants and can only be applied to private lessons. Awards will be given so long as funds are available. Although TAG is limited and amounts vary each year due to fundraising efforts, The Conservatory will make every effort to assist those students who otherwise would be unable to study at The Conservatory.

TAG RENEWALS

Awards are not automatically renewed from one year to the next. Current recipients of TAG are required to submit a new application packet by June 2022.

CONDITIONS OF GRANT

TAG awards are for partial-tuition. Continuation of the award through the academic year in which it is given is contingent upon the following:

- Regular attendance of lessons. More than two absences may result in the termination of assistance. All attendance policies apply.
- Students who qualify for TAG do not receive any additional registration discounts.
- Registration fees are paid in full and are not part of the grant.
- Monthly payments are expected on time. All enrollment policies apply.

REQUIRED FINANCIAL DOCUMENTS must accompany this completed application.

_____ Federal Tax Return (IRS form 1040) pages 1-2 required.

_____ SSI _____ Unemployment _____ Section 8 voucher

_____ Previous 2 months pay stubs for all wage earners in the family

_____ Other _____

APPLICANT INFORMATION

(Please use additional forms to fill out just the applicant section for additional students.)

Name of Adult Student _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

Is this an application for a renewal of a previous TAG award? YES NO (please circle)

Are you currently enrolled at The Conservatory? YES NO (please circle)

What is the applicant's primary residence arrangement? Please circle.

OWN RENT/LEASE Reside with Parent/Guardian Other _____

What is the estimated Monthly Housing Expense?: _____

What is the applicant's approximate yearly household income (gross)? _____

What/how much support does the applicant receive from other sources toward music therapy?

PARENT AND AID INFORMATION

Parent/Guardian 1

AIDE/Guardian 2

Name: _____

Name: _____

Address (if different): _____

Address (if different): _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Employer: _____

Employer: _____

Position: _____

Position: _____

Relationship: _____

Relationship: _____

Who is responsible for tuition payments: Please circle all that apply.

Adult Student Parent/Guardian 3rd Party Other _____

Please list and describe any additional monthly expenses that you would like us to take into consideration. Please additional sheet if needed.

Are there any other considerations you would like us to know? Please use an additional sheet if needed.

You have the option to include a written statement to accompany your application to clarify any of the above information that would adequately reflect this Adult Student's situation.

I certify that the answers and information provided on this form are accurate to the best of my knowledge.

Signature Date

Relationship to Applicant if not Applicant

Completed applications and documentation can be mailed to The Conservatory, 4059 Skyron Drive, Doylestown, PA 18902, emailed to rgallagher@myconservatory.org, or dropped off at the front desk.

FOR OFFICE USE ONLY
Date application received _____ Amount of Award _____ Award Letter _____