



TUITION SCHOLARSHIP APPLICATION FORM

Chorus Year 2016 – 2017 (9/1/16 – 8/31/17)

Non-refundable Application Fee: \$100

All scholarships at Contra Costa Children's Chorus are need-based and are funded from a dedicated scholarship fund. Scholarships are awarded on the basis of merit, ability and responsibility plus financial need. Partial scholarships may be granted for a partial chorus year (one semester) or full chorus year (two semesters). At no time are scholarships guaranteed for more than one year, and a new application must be submitted each year. While CCCC does its best to accommodate all families, there is only a limited amount of scholarship funds available.

For those who do not qualify for scholarships, work-trade arrangements may be available.

The questions asked in this application are designed to assist CCCC in understanding the family financial position to ensure that financial aid is awarded to those qualified members whose need is greatest. The information furnished in this application is kept completely confidential, and is only viewed by members of the scholarship committee as needed.

To apply for scholarship, your family must submit the following before the deadlines noted below:

- Scholarship Application Form**
- List of any other activities for which your child is receiving financial assistance (*on form*)
- Letter of extenuating circumstances explaining any hardship to family (*on form*)
- Signed **Scholarship Contract** (sign on last page of this form)
- A copy of your **most recent Federal Income Tax Return** – first two pages only
- \$100 non-refundable application fee

FILING DEADLINES:

- August 1, 2016** Returning Choristers
- August 1, 2016** New Choristers for Fall Semester, auditioned before 9/1
- October 1, 2016** New Choristers for Fall Semester, auditioned after 9/1
- March 1, 2017** New Choristers for Spring Semester 2016

STUDENT INFORMATION

Student's Name _____

Chorus Level _____ Date of Birth _____ School _____ Grade **2016-17** _____

Student's address _____ City _____ State _____ Zip _____

Student lives with: (*Circle one*) Both Parents Parent #1 Parent #2 Other

HOUSEHOLD INFORMATION

Status of parent/s with whom student resides: _____ married _____ single/divorced _____ widowed _____ other

Total size of both parent's households **9/1/16 – 8/31/17** will be: (use additional sheet if necessary)
 (*Include student, parents and parents' other dependent children*)

<u>Name</u>	<u>Age</u>	<u>Name</u>	<u>Age</u>
Parent #1. _____	_____	3. _____	_____
Parent #2. _____	_____	4. _____	_____

INCOME INFORMATION – For year 2016-17 (9/1/16-8/31/17)

	<u>Parent #1</u>	<u>Parent #2</u>	<u>Other</u>
1. Income (wages, interest, net business income)	\$ _____	\$ _____	\$ _____
2. Other receipts (Social Security, Aid to Families with Dependent Children (AFDC), unemployment compensation, child support, etc.)	\$ _____	\$ _____	\$ _____
TOTALS	\$ _____	\$ _____	\$ _____
Parent claiming student for 2016			
Income tax dependent (<i>mark with an X</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL INFORMATION

Parent #1's name _____

Parent #1's employer/occupation _____ / _____

Parent #2's name _____

Parent #2's employer/occupation _____ / _____

Child's activities other than chorus

	Activity	Tuition Paid	Financial Assistance Received
1. Dance	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
2. Instrument	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
3. Sports	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
4. Other Vocal	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____

“Letter of Extenuating Circumstances” – Statement of need which clarifies or expands on above information and would be useful in determining your student's need and amount of scholarship funds CCCC should award. Attach additional pages if needed.

SCHOLARSHIP CONTRACT (To be signed by parents/guardian)

I/we understand that accepting financial aid from CCCC constitutes a binding agreement between CCCC and us. We agree that my child will participate fully in chorus, attending all rehearsals and performances, and will follow the rules of discipline as stated in the Parent Student Manual. In addition, we will pay our share of tuition in a timely manner as agreed upon with the Finance Manager. If our economic circumstances improve sufficiently during the term of our scholarship award, we will notify CCCC that financial aid will not be required for the remainder of the term so that unneeded funds can be directed to another deserving family.

PLEASE NOTE THAT BY ACCEPTING A CCCC SCHOLARSHIP, YOUR CHORISTER IS COMMITTED TO A FULL YEAR'S PARTICIPATION IN THE PROGRAM. IF THEY WITHDRAW FROM CHORUS ANY TIME DURING THE YEAR, THEIR SCHOLARSHIP MAY BE REVOKED AND YOU WILL BE RESPONSIBLE FOR PAYING THE FULL TUITION FEE.

I swear that under the laws of California that all of the information on this form is true and complete to the best of my knowledge. If requested by Contra Costa Children's Chorus, I agree to provide proof of the information that I have given on this form. I acknowledge that I have read the above agreement, and understand and accept the responsibilities set forth therein.

Signed _____ Date _____

Phone _____

Email _____

Note: Attach only the first two pages of your most recent Federal Income Tax Return. If parents/guardians file separate tax returns, a copy of each must be provided. (For reasons of personal security, we suggest that you black out all social security numbers.)

Applications without the supporting materials requested will not be considered.

Please mail completed application and fee to: Contra Costa Children's Chorus
PO Box 2518
Walnut Creek, CA 94595-0518

If you have any questions, please email to: accounts@childrenschorus.org