

# STAGE DOOR CONSERVATORY

## FINANCIAL AID APPLICATION

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You may register your child(ren) for camp while your financial assistance application is pending. Please send the registration form and this application in the same envelope with a \$50 deposit per the instructions in the registration form. If you do not receive enough financial assistance to meet your needs, you are under no obligation to enroll your child in our programs and your deposit will be refunded to you in full, minus a \$25 processing fee. If you choose to enroll your child(ren), the full (or adjusted) tuition amount and any other required fees will be due by May 1. Extended payment plans are also available by request. Please call Rawna Romero at 510-521-6250 for additional information.

Child's Name: \_\_\_\_\_

School and Grade as of Fall: \_\_\_\_\_

Child's Name: \_\_\_\_\_

School and Grade as of Fall: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Address, City and Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Is there another parent or guardian who provides financial support, but does not live with the child(ren)? If so:

Parent/Guardian Name(s): \_\_\_\_\_

Address, City and Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

### FINANCIAL INFORMATION

Current Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Monthly Gross Income Before Deductions: (Please include wages, child support, financial aid or other income)!

Source of income: \_\_\_\_\_ Amount: \_\_\_\_\_

Source of income: \_\_\_\_\_ Amount: \_\_\_\_\_

Source of income: \_\_\_\_\_ Amount: \_\_\_\_\_

Total of all sources of income \_\_\_\_\_ Amount: \_\_\_\_\_

Average Total Monthly Expenses: \_\_\_\_\_ Amount: \_\_\_\_\_

Have you approached any other sources for assistance with tuition? ( ) YES ( ) NO

Who? \_\_\_\_\_ Their reply?: \_\_\_\_\_

Special Note: In order to help defray the costs of our financial aid program, we require families receiving assistance to participate in a tuition exchange program and volunteer a minimum of one three-hour shift for each \$100 they receive in aid prior to August 1. Participation in this program is necessary in order to receive assistance, unless a family has circumstances which limit their availability and obtains a waiver from our administrative offices. Volunteering can occur during day, evening and weekend hours, and could include assisting with errands, the preparation of sets, props and costumes, office activities, outreach and ticket sales.

( ) Yes, I agree to participate in the tuition exchange program if I am/we are awarded aid for our child(ren) and complete by obligation no later than August 1.

I certify that the above is true and correct and authorize Stage Door Conservatory to verify the information.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

In order for your application to be evaluated, the following Income Verification must be provided in the form of:

- A copy of your most recent pay check stub or income receipt
- A copy of your most recent paid tuition bill and current grant and/or loan documents, if you are a student

Please attach a verification of your income with this form and return it with your camp registration form. You may also include a typed or hand-written statement describing your circumstances and why aid would be necessary or helpful to you.