



Financial Assistance Request Form

The Toledo Symphony is able to offer financial assistance to individuals who are not able to pay full fees for lessons and classes. Please complete this form and return to Rachel Zeithamel at the address listed below.

All financial assistance is distributed on a case-by-case, first come, first-served basis.

Students receiving financial assistance are expected to adhere to the guidelines set forth in the TSSM Student Handbook. Students receiving financial support must also follow the guidelines below:

1. Students are required to attend all scheduled lessons.
 - With 24 hours advance notice, a teacher MAY decide to offer a make-up lesson, up to one per semester
 - Failure to notify teacher of an absence will result in an "unexcused absence". After 3 unexcused absences, the student will be dismissed from the program.
 - Students who are consistently late will be dismissed from the program.
2. Students are expected to practice regularly and show progress. Teachers will be asked to evaluate student's progress each semester.
3. Students are to play in at least one recital per year.
4. Parent or guardian of student will complete one volunteer hour (helping with recital, group class, etc).

Please PRINT the following information. Illegible forms will be discarded.

Student Last Name: _____ First Name: _____

Application Date: _____ Instrument: _____ Birthday: _____

Home Address: _____

City/State/ Zip: _____

Parent/Guardian Name(s): _____ Relationship: _____

Employer: _____ Occupation: _____

Home phone: _____ Work/Cell phone: _____

E-mail: _____ Additional Contact Method: _____

Name of School: _____ Grade: _____

School Music Teacher's Name: _____

Have you taken lessons before? YES NO If YES, what kind? GROUP INDIVIDUAL

Are you enrolled in the Toledo Symphony Youth Orchestra YES NO

Do you have an instrument? YES NO

If NO: do you have access to one through school or are you interested in using a TSO instrument (check one):

_____ I am able to get an instrument from my school

_____ I will need to use a TSO instrument
(Additional paperwork required and rental fee may apply)

Parent/Legal Guardian Data

Please answer the following questions as they apply to you and your family. This information is required by TSO and will be used for statistical and funding purposes. All answers will be kept confidential. Your answers will help to determine the amount of aid we are able to offer. Failure to answer the questions may result in loss of award.

The Toledo Symphony requires the following information for:

1. Ongoing solicitation of funds
2. Verification of serving public and private schools throughout our metropolitan area
3. Inclusion of participants from varied family income levels
4. Validation of ethnic background

Number of household members: _____

YEARLY FAMILY INCOME – (circle one)

Under \$10,000	\$10,000-14,999	\$15,000-19,999	\$20,000-24,999
\$25,000-29,999	\$30,000-34,999	\$35,000-39,999	\$40,000-44,999
\$45,000 -49,999	\$50,000-54,999	\$55,000-59,999	Over \$60,000

ETHNIC BACKGROUND *(used only for statistical analysis in reporting)* – circle one

American Indian/Alaska Native	Asian	Black/African American
Hispanic/Latino	Appalachian	White

Or write in preferred term of ethnicity: _____

Please share why you are applying for financial assistance: _____

I certify that the information provided is true and complete to the best of my knowledge. I grant the Toledo Symphony to verify this information. I agree to notify the TSO and TSSM if my financial status should change. I will abide by the guidelines given to remain in the program. I will pay for all lessons my child is scheduled for and will adhere to the attendance policy as stated above and in the TSSM handbook.

Signature of parent/guardian

Date

Signature of student

Date

Please return this complete form to Rachel Zeithamel, The Toledo Symphony, PO Box 407, Toledo Ohio, 43697

All information will remain confidential.

The Toledo Symphony School of Music
P.O. Box 407 Toledo, Ohio, 43697
419-418-0022

