



Financial Aid Application

Stringendo, Inc. is a private, non-profit organization with a mission to provide quality music education and a supportive musical community for students. Stringendo provides tuition assistance funds for children in families that exhibit financial need to attend orchestras, fiddle classes, or Summer Strings.

Incomplete applications are not considered.

All financial and personal information is held in strict confidence.

For this application to be considered complete, please be advised of the following:

- This form must be accompanied with a copy of the first 2 pages of each supporter's most recently filed IRS Income Tax Return (1040 or 1040-SR).
- Please use a dark permanent marker to conceal any social security numbers listed on all included forms.
- Musician for whom assistance is sought MUST be listed as a "dependent" on the included 1040 or 1040-SR.

To apply for a scholarship, please send:

- Completed financial aid form
- Required tax forms as listed above
- Completed program registration form
- Registration deposit for program (\$25 per program or \$25 per week for Summer Strings)

For which program(s) are you applying for financial aid:

_____ Orchestra Program _____ Fiddle Program _____ Summer Strings

Parent/Guardian Name _____

Address, City, Zip _____

Phone _____ Email _____

Child's Name _____

Age _____ Instrument _____ Years of Study _____

School: _____ Grade: _____

Number of members in your household? _____ Number of dependent children _____ Ages _____

Is your child eligible for free/reduced school lunch? ___ free ___ reduced ___ no ___ not applicable



Please provide answers to the following:	Actual Last Completed Tax Year	Estimated Current Tax Year
1. What is your total adjusted gross income? <i>(form 1040: line 11, or form 1040-SR: line 11)</i> Include combined TOTAL of adjusted gross income for ALL supporters.	\$	\$
2. Non-taxable income and/or benefits (listed above) received by your family: Social Security Unemployment Compensation Family Gifts or Support Interest on Tax-Free Bonds Child Support Untaxed Portions of Pensions Welfare Housing Allowance	\$	\$
3. TOTAL INCOME <i>(add lines 1 and 2)</i>	\$	\$

Monthly Family Expenses

Rent / Mortgage Payment \$ _____ Rent Mortgage

Average Monthly Utilities \$ _____ (list): _____

Other Monthly Expenses \$ _____ (list): _____

Please list any extenuating circumstances and subsequent financial implications that show your need for financial aid.

I attest that the information I have provided is true to the best of my knowledge. I understand that late or incomplete forms will not be considered.

Signature _____ Date _____

Return paperwork with your deposit to: Stringendo, Inc., P.O. Box 302, Lagrangeville, NY 12540

----- **For Office Use Only:** -----

Date Received _____ Amount awarded _____ Date notified _____

Notice of Non-discriminatory Policy: Stringendo, Inc. admits students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. Stringendo, Inc. does not discriminate on the basis of race, creed, color, religion, disability, national origin, sexual orientation, gender expression, military status, sex, age or marital status in any of its activities or operations.

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