

TUITION ASSISTANCE APPLICATION
VIRTUOSI OF HOUSTON (VOH)
SMALL ENSEMBLE SUMMER WORKSHOP

Send completed form to:

Michele Gunn, Virtuosi of Houston, 2121 Kirby Drive #117, Houston, TX 77019

PLEASE NOTE: Because limited assistance funds are available, financial need is a major factor to be considered in the awarding of most tuition assistance. **In order to make the VOH Small Ensemble Summer Workshop accessible to all, please give serious consideration to how much you need this assistance.** All tuition assistance applicants will be notified in writing of the Executive Committee's decisions, which are final.

PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION.
ALL INFORMATION WILL BE TREATED BY VOH AS STRICTLY
CONFIDENTIAL.

(PLEASE PRINT)

Name of applicant (student) _____ Date of birth _____

Home address _____

City _____ Zip _____ Phone _____

School in **spring, 2011** _____ Grade in **spring, 2011** _____

School music director in **spring, 2011** _____

Was this student in VOH in 2010-2011? YES NO

Instrument _____ How long has student played? _____

Does the student study privately on this instrument? YES NO

 If yes, with whom? _____

Name of parent(s)/guardian(s) _____

Occupation of father/guardian _____

Place of employment/title _____

Occupation of mother/guardian _____

Place of employment/title _____

Please describe applicant's experience in chamber music ensembles.

Please describe any major music honors or awards.

CONFIDENTIAL FINANCIAL INFORMATION

In order to help us determine how best to allocate our limited resources, and since this assistance is based on financial need, we will need some additional, strictly confidential financial information.

Annual gross family income from all sources \$ _____ ***(Please attach a copy of both sides of the first page of your 2010 Federal income tax return, with your adjusted gross income information, etc. If you have not completed your 2010 Federal income tax return, please use your 2009 return.)*** In situations of joint custody, both parents' incomes should be reported.

Ages of all children living at home, including applicant _____

Other dependents? Please specify. _____

Are you receiving other financial assistance for VOH participation or private lessons (For example, from school, church, music clubs, etc.)?

Yes

No

If yes, what amount? _____ Source _____

How much financial assistance are you **hoping** to receive from VOH with this application? _____

Are there other possible family sources of financial assistance? (For example, a parent who may not live with the child full-time, grandparents, etc.) Yes No

If the answer is yes, approximately how much assistance could they provide? _____

Please discuss in the space below any other personal financial issues or special circumstances that you feel the Executive Committee should consider in making the awards. (Use additional page, if necessary.)

*VOH reserves the right to request additional family financial information, if necessary.
All financial information will be held in strictest confidence.*

Give others a helping hand – We hope that your acceptance of any tuition assistance for the Small Ensemble Summer Workshop will encourage you to support the organization by participating in performance and fundraising activities that will help us raise funds for other deserving members.

We certify that all of the information in this application is true and correct.

Parent/Guardian signature _____ Date _____

Student signature _____ Date _____

Please print student's name _____

Space below is for office use only.