



# The NEW SCHOOL of MUSIC

25 Lowell Street  
www.newschoolofmusic.org

Cambridge, MA 02138  
(617) 492-8105

## **Scholarship Application ( funds are limited. Please apply as early as possible)**

### **I. Background Information:**

Name of Student: \_\_\_\_\_

If student is under 18 years old:

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Grade (in Fall)

\_\_\_\_\_

School Attending: \_\_\_\_\_ Public \_\_\_\_\_ Private

\_\_\_\_\_

Parent(s) or Guardian(s):

\_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent(s)/Guardian(s) Occupation:

\_\_\_\_\_

Work/Day Phone: \_\_\_\_\_ Home/Evening

Phone: \_\_\_\_\_

Parent/Guardian E-Mail(s):

\_\_\_\_\_

Number of Children in Household: \_\_\_\_\_

Number of other Dependents in Household: \_\_\_\_\_

Relationship: \_\_\_\_\_

**III. Financial Information:**

| Annual Gross Family Income                                    |    | Annual Non-Reimbursable Expenses        |    |
|---|----|---|----|
| Parent's Gross Yearly Earnings (must match income tax forms)  | \$ | Rent or Mortgage Payments               | \$ |
| Partner's Gross Yearly Earnings (must match income tax forms) | \$ | Real Estate Tax (not mortgage payments) | \$ |
| Alimony Payment   | \$ | Education (tuition expenses)            | \$ |
| Child Support Payments  | \$ | Payments on loan                        | \$ |
| Rent Income   | \$ | Payment for support of others           | \$ |
| Unemployment  | \$ | Medical Bills                           | \$ |
| Social Security   | \$ | Other<br>_____                          | \$ |
| Welfare   | \$ |   |    |
| Other<br>_____  | \$ |   |    |
|   |    |   |    |
| <b>TOTAL</b>  | \$ | <b>TOTAL</b>                            | \$ |

Are you receiving a reduction in tuition from another school?

\_\_\_\_\_

If yes, where, and what is the reduction?

\_\_\_\_\_

What is the total amount per year you feel you can pay? \$\_\_\_\_\_

**III. Income Tax Statement:**

**ALL STUDENTS must submit a copy of their family's complete income tax statement forms, including all schedules.**

**IV. Course of Study:**

Do you own the instrument that you would like to study? Y\_\_\_\_\_ N\_\_\_\_\_

Do you receive scholarship money from any other organizations? Y\_\_\_\_\_ N\_\_\_\_\_ *(If you answered yes to this question, the Scholarship Committee will take that into consideration when deciding on scholarship students)*

| Previous course of Study  | Proposed Course of Study   |
|---|--|
| <p>Did you receive a scholarship last year? _____</p> <p>Private lessons length:<br/>           _____ 30 min.<br/>           _____ 45 min.<br/>           _____ 60 min.</p> <p>Private Lesson Teacher:<br/>           _____</p> <p>Class(es) or Ensemble(s)<br/>           _____<br/>           _____</p> | <p>Check all that you plan on registering for:<br/>           _____ Fall<br/>           _____ Spring<br/>           _____ Summer</p> <p>Private lessons length:<br/>           _____ 30 min.<br/>           _____ 45 min.<br/>           _____ 60 min.</p> <p>Private Lesson Teacher:<br/>           _____</p> <p>Class(es) or Ensemble(s)<br/>           _____<br/>           _____</p> |

**V. Statement of Intent:**

Please state why you want this scholarship, what it means to you, etc. This does not need to be extensive. Please note that the NSM staff may contact you if we're interested in using a quote from this statement for grants, fundraising events, etc. Use the back of this page if necessary

**VI. Signature: I hereby state that the above information is true.**

\_\_\_\_\_ Parent/Guardian Signature if student is under age 18



# The NEW SCHOOL of MUSIC

Due to the generosity of our donors, financial assistance based on need is available through the Nicholas Van Slyck Scholarship Fund. NSM Scholarships are available for the spring term, apply now with the attached form.

***If you have any questions please stop by our office, call 617-492-8105 or email us at [info@cambridgemusic.org](mailto:info@cambridgemusic.org).***

Please drop-off or mail completed application materials to:

**New School of Music  
25 Lowell Street  
Cambridge, MA 02138**

Or, fax completed application materials to:  
**(617) 864-7318**

## **NSM Scholarship Guidelines**

- Scholarship recipients will be notified by telephone. Further details about the scholarship will be included in this call.
- Incomplete applications will not be accepted.
- Only one student per form.
- All scholarship students receive *a percentage* of their tuition covered by NSM's Scholarship Fund.
- Scholarship recipients will automatically receive scholarships for the remainder of the academic year when they register.
- You will need to reapply for your scholarship in August for Fall Term 2009.