



Claremont Community School of Music
Development Office
951 West Foothill Boulevard
Claremont, CA 91711

**Summer 2008
Financial Assistance Request
Confidential**

In order for the Claremont Community School of Music to award financial aid to those who need it, we require each applicant to provide the information listed below. Use a separate sheet to note special circumstances you wish to have considered. Continued assistance is contingent on student attendance and progress.

Student Name: Age:
Street Address:
City, State, Zip Code
Home Phone:

Instrument or Class:
Instructor:
Total Tuition:

Names and ages of other children in the family:

How many children/family members will be enrolled at CCSM during the period of this award?

Father/Guardian: Father's Current Monthly Income:
Father's Employer:
Street Address:
City, State, Zip Code:
Home Phone:
Work Phone:
Cell Phone:

Mother/Guardian: Mother's Current Monthly Income:
Mother's Employer:
Street Address:
City, State, Zip Code:
Home Phone:
Work Phone:
Cell Phone:

Other Income Sources:
(Interest, Dividends, Alimony, Child Support, Pensions, Rents/Royalties, etc.)

Total Current Monthly Income:

*Total Adjusted Gross Income 2007:

*Attach a copy of your **2007 Federal Income Tax Return and all W-2 forms** with your student registration form. Applications will not be reviewed until all requested items are submitted. Financial Assistance is determined using a sliding scale that considers financial resources, assets, number of dependent children, and number of children studying with the school. **Applications are due May 23, 2008.**