



**Financial Aid Application - 2023-2024  
NEW Student**

**DEADLINE: SEPTEMBER 23rd**  
(With the other required documents)

Please fill out **BOTH** sides of this application in full.

Student's Name: \_\_\_\_\_  
Last First

I am requesting aid for the following:

| Class Package | Package Tuition | Aid Requested |
|---------------|-----------------|---------------|
|               |                 |               |
|               |                 |               |
|               |                 |               |
|               |                 |               |

**Total Assistance Requested for this Student:** \$ \_\_\_\_\_

*\*Note: Families are required to pay Registration and Performance Fees – please deduct from your total amount requested.*

Parent #1/Legal Guardian Name: \_\_\_\_\_  
Last First

Parent #1/Legal Guardian Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
\_\_\_\_\_

Parent #2/Legal Guardian Name: \_\_\_\_\_  
Last First

Parent #2/Legal Guardian Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
\_\_\_\_\_

Annual total household income: \_\_\_\_\_

Number of children in above household: \_\_\_\_\_

Have you received financial aid from us in the past? \_\_\_\_\_

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**PLEASE USE THIS SPACE TO TELL US ABOUT YOUR NEED FOR FINANCIAL ASSISTANCE**

Please provide any additional information you would like the Financial Aid Committee to have, for example, changes in employment status, special family circumstances, etc.

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(For office use only)

Registration fee paid: Date: \_\_\_\_\_

Performance fee paid: Date: \_\_\_\_\_

Office: Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_