

Patel Conservatory at the David A. Straz, Jr. Center for the Performing Arts
Summer 2012 SESSION

Financial Assistance Questionnaire
APPLICATIONS DUE BY May 7, 2012
(Incomplete applications will not be considered)

You must provide the following items to document proof of income:

- Most recent tax return **(required)**
- Current payroll check stub **or** Unemployment/Disability records **(required)**
- A letter with a brief explanation of why assistance is needed **(required)**
- One letter of recommendation for the student from a teacher, community leader, church member, etc. **(required)**

____ New
____ Returning

Student Name _____

Enrolling in _____ (course number and description)

Student Lives With: _____

_____	Name	_____	Home Phone
_____	Address	_____	Alternate Phone
_____	City	State	Zip
_____			E-mail

What is the full tuition of the class(es) you are applying for? \$ _____

On the next line, circle the person whose information is given below:

Self/Guardian (Head of House)

Spouse/Guardian (Other Contributors)

Name _____

Name _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Address _____

Address _____

Earnings Per Month _____

Earnings Per Month _____

Please list all other household income _____

Academic School Student Attends _____ Current Grade Level of Student _____

Does student have a job? Yes No

Earnings Per Month _____

Dependents in the household _____ Enrolled at the Conservatory?

_____ Yes No

I certify that the information presented in my application materials is true and correct to the best of my knowledge. I understand that incomplete or falsified applications will not be considered.

Adult Student or Guardian's signature

Date

Mail to: PO Box 518 Tampa, FL 33601-0518
Attn: Finance Department

Fax to: 813.222.1277