

North Carolina Chamber Music Institute Financial Aid

Form 2018-2019

A limited number of scholarships will be awarded **based on need**. Each scholarship will be considered on an individual basis. A key criterion that NCCMI uses for this determination is the Federal Income Chart, seen on reverse of this page.

All students must register online (\$50 fee), complete an audition for admission and sign the agreement form. Follow instructions at nccmi.org. In cases of extreme need, the registration fee can be waived.

To apply for tuition assistance for NCCMI, please provide the following:

- 1) This completed Financial Aid Form
- 2) Copy of pages 1 and 2 of your 2017 Form 1040 federal income tax return.

SECTION A

Applicant's Name: _____ Instrument played: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Birth Date: _____

Student Phone: (_____) _____ - _____ School attending: _____ Grade Level: _____

Mother's Name: _____ Father's Name: _____

Title/ Occupation: _____ Title/Occupation: _____

Employer: _____ Employer: _____

Cell phone: _____ Cell phone: _____

Email: _____ Email: _____

Name of Music Instructor: _____ Instructor phone: _____

Instructor email address: _____

Scholarships are intended to cover all or part of tuition costs.

To what degree are you requesting financial aid? Partial Tuition Full Tuition

SECTION B

1. Is your child currently getting free or subsidized lunch at school? ___Y___N

2. Do you receive any other allotment of monies from agencies representing Aid to families with dependent children and/or NC public aid and/or food Stamps/WIC? If yes, how much monthly _____?

3. Qualifies for Medicaid? ___Y___N

Please provide documentation of proof for any above "yes" items in questions 1, 2 or 3.

4. Is this a single parent or two parent household? _____

5. What is the household size (number of full time occupants during the school year)? _____

6. Have you received scholarship aid from NCCMI before this year? ___Y___N

7. If yes, when and what amount? _____

(Continued next page)

8. Number of immediate family members under age 18 _____ How many siblings in college? _____

9. Are there other factors that we should consider in the distribution of financial aid? Please attach, if necessary.

10. Are you in need of a payment plan if tuition assistance is not approved or only partially funded? ____Y ____N
If so, check preferred payment plan option: ____Two-Part Payment Plan ____Four-Part Payment Plan

11. Volunteer work is not mandatory for scholarship consideration; however, NCCMI appreciates any help offered. Do you or does anyone in your family have special suggestions or skills that could you would like to make us aware of? If yes, please explain. Use the back of this page if necessary.

12. Check here to indicate you have attached a copy of pages 1 & 2 of your 2017 Form 1040 federal income tax return:

I declare that all the information submitted is complete and correct to the best of my knowledge. I understand that I am responsible for paying all balances by agreed upon date and reporting any increases or decreases in my family's income/expense to NCCMI immediately.

Parent/Guardian Signature _____ Date _____

Parent/Guardian name (Please print or type) _____

Send to: NCCMI Scholarships, 3131 Ashel St., Raleigh, NC 27612

FEDERAL INCOME CHART

Household size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	22,311	1,860	930	859	430
2	30,044	2,504	1,252	1,156	578
3	37,777	3,149	1,575	1,453	727
4	45,510	3,793	1,897	1,751	876
5	53,243	4,437	2,219	2,048	1,024
6	60,976	5,082	2,541	2,346	1,173
7	68,709	5,726	2,863	2,643	1,322
8	76,422	6,371	3,186	2,941	1,471
Each additional person:	\$7,733	\$645	\$323	\$298	\$149