

# The John F. Kennedy Center for the Performing Arts Education Department

**OFFICE USE ONLY:**  
Rec: \_\_\_ / \_\_\_ / \_\_\_  
IRS: 2008  2009   
Status: A W D  
Amt: \$ \_\_\_\_\_

## NSO Summer Music Institute Financial Aid Application

**Deadline for both applications:  
Friday, January 22, 2010**

If you are interested in receiving financial aid to help defray transportation expenses, please complete the following application. Information on this form will be kept confidential. **The deadline for submitting this application, the NSO Summer Music Institute Application (see web site [www.kennedy-center.org/nso/nsoed/smi/](http://www.kennedy-center.org/nso/nsoed/smi/) for address by state) and any related materials is January 22, 2010.** Students selected to participate in the summer program will be notified of any financial aid awards in their acceptance letter. Financial aid requests are reviewed after the audition/selection process and have no bearing on a student's acceptance to the program. A limited amount of financial aid is available in cases of extreme need.

**A copy of parent(s) or guardian(s) 2009 (preferred) or 2008 Federal Income Tax Return must accompany this application in order to verify financial information.**

Please note: If 2008 Return is used, please estimate what the 2009 information will be (if significantly different) and include it with the application. A copy of the 2009 Return may be requested at a later date. Any significant changes in income may affect the amount of aid awarded.

Student's Name: \_\_\_\_\_  
(last) (first) (middle)

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

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

Phone: (\_\_\_\_\_) \_\_\_\_\_ (day) (\_\_\_\_\_) \_\_\_\_\_ (eve)

Birthdate \_\_\_\_\_  
(mo/day/yr)

Other members of the household:

<u>Name</u>	<u>Relationship to Student</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Number of household members in school: \_\_\_\_\_

Total gross household income: \_\_\_\_\_

Other sources of income (i.e. inheritance, veteran's benefits, etc.): \_\_\_\_\_

Total amount in savings account(s): \_\_\_\_\_

Amount of Aid requested for transportation: \$ \_\_\_\_\_ List approximate amount of R/T travel expense \$ \_\_\_\_\_

You may attach a brief letter or supplemental documentation explaining any significant changes in income or other extenuating circumstances that should be taken into consideration.

**Financial Aid Application MUST accompany NSO Summer Music Institute Application. If sent separately, it will not be considered. Financial Aid Application for US applicants only.**