



Allegheny Mountain String Project

Financial Aid Application

2017-2018 Season

Application Deadline: August 18, 2017

Financial aid for the Allegheny Mountain String Project is made possible by the Garth Newel Music Center, The Allegheny Foundation, the Bath County Arts Association, the Bolar Ruritan Club, the Highland County Arts Council, and the Community Foundation of Central Blue Ridge.

The AMSP Confidential Application for Financial Aid consists of three sections: (I) Parent Contact Information (II) Student Information (III) Financial Information.

All financial information is kept strictly confidential.

Financial aid awards are deducted from total tuition; no money changes hands from the AMSP to recipients. Applicants will be notified by August 31, 2017.

The acceptance of financial assistance carries with it an obligation on the part of the student to attend lessons and rehearsals on a regular basis, participate in the AMSP recitals as determined by your instructor, and work faithfully toward making progress on his/her instrument. The AMSP reserves the right to discontinue the award and lessons to any student whose work or behavior is deemed unsatisfactory.

We also require each financial aid family to attend at least ONE concert at Garth Newel Music Center during the year. This is free to all AMSP students, and one accompanying adult.

Award of financial aid does not guarantee assistance in the future. Financial aid applications must be completed each semester. A parent or guardian of each financial aid recipient will be required to sign a letter of agreement accepting the terms of the financial aid and to return it at the student's first lessons of the term.

For any questions, please contact:

Jaime McArdle- 540.839.2617 or jaimemcardle@icloud.com

Gretta Sandberg- 540.468.2769 or grettasandberg@gmail.com

Completed forms may be hand delivered to your instructor or mailed to:

Allegheny Mountain String Project

C/O Garth Newel Music Center

PO Box 240

Warm Springs, VA 24484

SECTION I: Parent Contact Information

Parent/Guardian Names			Relationship to student		
Address		City	State	Zip	County
Email					
Home Phone Number		Work/Alternate Phone		Cell Phone	
Parent/Guardian Occupation			Company/Location		
Secondary Parent/Guardian Occupation			Company/Location		

Other Parent/Guardian (if separate household only)			Relationship to student		
Address		City	State	Zip	County
Email					
Phone Number		Work/Alternate Phone		Cell Phone	
Parent/Guardian Occupation			Company/Location		
Secondary Parent/Guardian Occupation			Company/Location		

SECTION II: Student Information (Total family members enrolling in AMSP _____)

Name of Student		Age	Grade in School
School Attending		School Teacher	
Name of AMSP Teacher		Location of Lessons	Lesson Length
Instrument		Rental Company (if applicable)	Cost (per month)

Name of Student (2)		Age	Grade in School
School Attending		School Teacher	
Name of AMSP Teacher		Location of Lessons	Lesson Length
Instrument		Rental Company (if applicable)	Cost (per month)

Name of Student (3)		Age	Grade in School
School Attending		School Teacher	
Name of AMSP Teacher		Location of Lessons	Lesson Length
Instrument		Rental Company (if applicable)	Cost (per month)

Name of Student (4)		Age	Grade in School
School Attending		School Teacher	
Name of AMSP Teacher		Location of Lessons	Lesson Length
Instrument		Rental Company (if applicable)	Cost (per month)

SECTION III: Financial Information

Actual 2016 Income				
Father	Mother	Other Sources (include child support)		
Estimated 2017 Income				
Father	Mother	Other Sources (include child support)		
TOTAL ESTIMATED 2017 ANNUAL INCOME:				
		Adults		
Number in Family supported by above income:		Children		
Total AMSP Related Cost				
	Student 1	Student 2	Student 3	Student 4
Year Total Lesson Fees				
Instrument Rental or Purchase Fees (For a year)				
Other AMSP related fee (if applicable)				
TOTAL COST				

Please describe below any circumstances that may be helpful in understanding your request for aid.

If returning student, please list at least one date you attended a GNMC Concert:

I certify the information provided in this confidential document is correct:

Signature _____ Date _____