



Office use only: Date Received: _____ Receive By: _____
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Tuition Assistance Application

Semester (circle one) **Fall** (due by Aug. 15) **Spring** (due by Dec. 15) **Summer** (due by May 15)

Please Note: Applicants must reapply each semester

Financial assistance will not cover full cost of tuition (70% max).

In order to register, you must make a \$25 non-refundable deposit per family toward tuition.

Part 1: Participant Information

Student Name: _____ DOB: _____

Home Phone: _____ Cell: _____

Email: _____

Mailing Address: _____

Part 2: Parent/Guardian Information (If applicant is under 18.)

Parent/Guardian 1

Name: _____

Mailing Address: _____
(If different from above)

Home Phone: _____

Cell Phone: _____

Email: _____

Parent/Guardian 2

Name: _____

Mailing Address: _____
(If different from above)

Home Phone: _____

Cell Phone: _____

Email: _____

Part 3: What class(es) are you requesting tuition assistance for?

Class: _____ Cost: _____

Class: _____ Cost: _____

Class: _____ Cost: _____

Class: _____ Cost: _____

Class: _____ Cost: _____

Part 4: The following forms are required to apply. (Attach to this form – Please mark below, which forms are attached.)

- Applicants (or parents if under 18) two most recent paystubs.
- IRS 1040 (Only SSN# may be blacked out) listing the applicant as either taxpayer or dependent

If you don't have an IRS 1040, the following will be considered as proof of need:

- Proof of current Social Security support payments
- NH Department of Health & Human Services Notice of Decision (Food Stamps)
- OTHER (Please ask if you are unsure.)

Part 5: Are there any special circumstances that the Tuition Assistance Committee should know about?

Part 6: Please write a brief letter about why you want to participate in classes at MoCo Arts.

***We often use these stories in marketing and grant writing efforts, but will never include your name.*

I have verified all of the above information for accuracy. I understand this request will not be reviewed or considered until the *full application* is submitted. I will submit a copy of this form and materials to: MoCo Arts, 40 Roxbury St., Keene, NH 03431

Signature: _____

Print Name: _____ Date: _____

Thank you for participating in our Tuition Assistance program!
Please return or mail this completed application and all materials to:

MoCo Arts, 40 Roxbury Street, Keene, NH 03431

All tuition assistance is awarded without regard to sex, race, religion, national origin, or sexual preference. All information is confidential.