



SCHOLARSHIP SUPPORT

Application for: **Symphony Orchestra Tuition** **Frost Valley Retreat Fee**
 String Ensemble Tuition **Wind Ensemble Tuition**

Please Print:

Musician's Last Name _____ First Name _____

Grade in School in **2010-2011** _____ Age _____ Instrument: _____

(Guardian(s) can be substituted for Father or Mother below.)

* Father's Name _____ * Mother's Name _____

Address _____ Address _____

Phone _____ Phone _____

Email _____ Email _____

Name of Employer _____ Name of Employer _____

Address _____ Address _____

Nature of Business _____ Nature of Business _____

Position Held _____ Position Held _____

* If the parent completing this form is separated or divorced, and if it is necessary, please duplicate this form and have the other parent fill it out independently.

Total adjusted gross income as listed on the previous year's parents'/guardians' joint income tax return or on the combined returns of both parents/guardians: \$ _____

Please attach a copy of your 2009 federal tax return(s).

Number of dependent children: _____ Ages: (circle those in college) _____

Number of others dependent on family for major financial support (i.e. more than 50% of their support): _____

Amount of assistance requested from the WCYO: \$ _____

Additional comments by parents/guardians that may be of aid to the Scholarship Committee. (Please continue on reverse if necessary.)

The above information is true and accurate: (Guardian(s) can be substituted for Father or Mother below.)

Father's signature _____ Date _____

Mother's signature _____ Date _____

**Please complete form and submit to:
WCYO SCHOLARSHIP COMMITTEE
P.O. Box 964, Ridgefield, CT 06877**

*** Completed form must be submitted by JULY 10, 2010 for consideration for the 2010-2011 season. ***
Please refer questions to the WCYO office at (203) 894-8786 or info@wctyo.org