

## Scholarship Needs Based Form

Please Circle the Program that your child is going to participate in?
Sinfonia
Northshore Sinfonia
Philharmonia
Northshore Philharmonia
Symphony
Chamber Program
Endangered Instruments Program (EIP)
Young Artist Academy (YAA)
Summer Fest
Summer Orchestras

## Fall Retreat

## **Musical Training** Instrument \_\_\_\_\_ Number of Years in GNOYO \_\_\_\_\_ School \_\_\_\_\_ School Music Teacher \_\_\_\_\_ Private Lesson Instructor \_\_\_\_\_ Grade \_\_\_\_\_ **Parents Father** Name Email Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Work Address

Work Phone	
Mother	
Name	
Email Address	
Home Phone	
Cell Phone	_
Occupation	_
Work Address	
Work Phone	
Financial Information	
Child lives with	
Zip Code	
Ethnicity	
Qualifies for free or reduced school lunches	
Household Income	

Household type	
Monthly Mortgage or Rent	
Child Support	
Amount Per Month	
Number of Children	
Number of Children in GNOYO	
Names/ages of dependent children	
Any additional factors to consider	

Please email all tax returns to <a href="mailto:gnoyo@gnoyo.org">gnoyo@gnoyo.org</a>