

# ETHOS YOUTH ENSEMBLES

P.O. Box 332255, Murfreesboro, TN 37133  
Phone: (615) 668-7480  
www.ethosmusic.net

## FINANCIAL ASSISTANCE AWARD APPLICATION

This Financial Assistance Award Application must be submitted to ETHOS before the first rehearsal for consideration. Awards are based primarily on financial need of applicant, who must be in good standing with the ETHOS program. You can mail this form to the address above or send via email to [brussell@ethosmusic.net](mailto:brussell@ethosmusic.net).

Applicant's Name: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

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

\_\_\_\_\_

Email: \_\_\_\_\_

Please indicate the type of Financial Assistance Award for which you are applying.

1. Tuition Waiver \_\_\_\_\_

Please choose the ensemble/class for which you would like tuition waived

Philharmonic                  Wind Symphony                  Jazz Ensemble

String Orchestra              Camerata                          Preparatory Choir

Academy Year One                                  Academy Year 2

2. Strings Alive! String Instrument Loan \_\_\_\_\_

*This program provides string instrument loans at no cost to the student.*

*Instrument Desired:* \_\_\_\_\_

ETHOS Youth Ensembles strive to provide financial assistance awards to those students whose circumstances warrant such aid, without regard to gender, race, religion, creed or nationality. The ETHOS Board will endeavor to provide as many Tuition Waivers as funding permits.

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## **CONFIDENTIAL FINANCIAL INFORMATION** (For use in considering needs-based financial assistance only)

Please provide the following financial information.

\_\_\_\_\_  
Father/Guardian Name                      Occupation                      \$ \_\_\_\_\_  
Annual Income

\_\_\_\_\_  
Mother/Guardian Name                      Occupation                      \$ \_\_\_\_\_  
Annual Income

If you receive any monthly support payments, please list the amount.      \$ \_\_\_\_\_

TOTAL ANNUAL INCOME                      \$ \_\_\_\_\_

Total persons living together as a family unit: \_\_\_\_\_

Please describe any special circumstances that you would like the Board to take into consideration regarding your financial situation. You may add one additional page if necessary:

I certify these statements to be true and correct to the best of my knowledge.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date