

2020-2021 Application for Funds for Access

Serving the
Gadsden Community School for the Arts
Downtown Dance Conservatory
Etowah Youth Orchestras

The Gadsden Cultural Arts Foundation
Confidential Financial Aid Application

The Fund for Access

Thanks to the leadership gift from the Gadsden Cultural Arts Foundation (GCAF) and additional gifts from other donors, the Gadsden Community School for the Arts (GCSA), Downtown Dance Conservatory (DDC), and Etowah Youth Orchestras (EYO) are able to provide financial aid to students who meet a series of qualifications. Aid is available to existing and future students in all instructional programs under the umbrella of the Gadsden Cultural Arts Foundation. In order to qualify, students must submit this form and demonstrate financial need. Since funds are limited, please be sure to apply early.

Families must apply once during the academic year for financial aid. The application period for the 2020-2021 academic year is August 1, 2020 – August 15, 2020. In order to be renewed each subsequent semester, students must show commitment through attendance at lessons, classes, and/or rehearsals. After one semester, students with significant absences may lose support for the next semester at the discretion of the program staff. Preference for scholarship renewals will be given to returning students who have met award obligations. Scholarship award amounts will be reviewed each semester, and may be increased or decreased based on evaluations by instructors and program staff. Please note that for the Summer Semester award amounts will be adjusted in proportion with the overall class fee amount. While award amounts will vary based on application information, awards generally does not cover GCSA and DDC registration fees, instructional supply fees for GSCA and DDC lessons and classes, or instruments for private instrumental music instruction through the GCSA.

Award Obligations:

- Consistent attendance at lessons, classes, and/or ensembles.
- Consistent practice and preparation for lessons, classes, and ensembles.
- Positive evaluations from teacher.
- Recipient must pay tuition bills, fees, etc. not covered by financial aid in full and in a timely fashion.

Please note – at the time of application, all outstanding fees from the previous semester, **MUST** be paid in full.

Selection Policy

Financial aid decisions are made according to the following:

- Financial need, as indicated by income and/or family and extenuating circumstances.
- Availability of funds
- Progress of the student (for returning students)
- Applicant’s payment history with the instructional programs of the GCAF.

Instructions

The Following items must be completed and submitted to the GCAF by August 1 in order to be considered for tuition assistance.

- **Confidential Tuition Aid Application-** Please complete all sections of this application fully and accurately. If more than one student in the family is applying for assistance, a separate application is needed for each student.
- **Copy of the most recent U.S. Tax Form completed by your family (Form 1040, 1040A or 1040EZ)** must be attached to the Confidential Tuition Aid Application. If your family also receives government assistance, please provide a copy of your benefits information or a payment check stub. If more than one student in the family is applying for assistance, you may submit only one copy of this form.
- **If changes exist since the filling of the attached tax form.** If additional explanations of financial or other circumstances are required, information should be provided in writing on the Statement of Financial Need.

Applications that are incomplete or do not include **ALL** of the documentation above **WILL NOT BE REVIEWED.**

- **An email** will be mailed to inform families of their award status. Notification will arrive after the respective application deadline.

GCAF Financial Aid Application General Information Form

Student Name: _____

School: _____ Grade in School: _____

Parent(s)/Guardian(s) Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Work phone: _____

Parent cell phone: _____ Parent email address: _____

Please circle preferred method of contact

The student listed above is applying for financial assistance from the Funds for Access for the following programs (check all that apply):

_____ Gadsden Community School for the Arts

_____ Private instrumental or vocal music instruction

_____ Visual arts classes

_____ Downtown Dance Conservatory

_____ Etowah Youth Orchestras

* Students requesting financial support for the programs of the Etowah Youth Orchestras must also complete and attach the EYO addendum. Please note – if you are applying for assistance for PRIVATE music instruction, these lessons are offered through the Gadsden Community School for the Arts! If you have any questions regarding this, please contact the EYO directly.

Voluntary Information:

This information is used for the purposes of insuring diversity.

Student's age _____

Student's gender _____

Student's race _____

Financial Aid Application Information Form

Current Annual Income – please list all sources of income for all household members

Parent/Guardian #1 _____ \$ _____

Parent/Guardian #2 _____ \$ _____

Other annual income (please specify source and amount)

_____ \$ _____

_____ \$ _____

Total **Current** Annual Income \$ _____

If this amount differs from the amount show on the submitted Federal Income Tax Form 1040, please explain below:

Dependants – please list all dependents in household by name, beginning with student applying for financial aid:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Does the student applicant qualify for the free or reduced lunch program? ____ yes ____ no
If divorced or separated, does the non-custodial parent assist with expenses? ____ yes ____ no

I certify that I have provided current, accurate and truthful information. I understand that should I receive financial aid, I will be responsible for paying any tuition balance and applicable fees by indicated deadlines. I have signed the attached Letter of Agreement outlining attendance and other guidelines and understand that my instructor will be aware that I receive financial aid in order to help the evaluation process.

Knowing what the tuition is for the program in which your student is enrolling, what amount do you believe you can contribute monthly toward this tuition? _____

Parent/Guardian #1 Signature

Date _____

Parent/ Guardian #2 Signature

Date _____

Letter of Agreement

Name of Financial Aid Applicant _____

As a potential recipient of financial aid, you must meet the five expectations outlined below. This will ensure that you receive the best possible art/music/dance education and that the Gadsden Cultural Arts Foundation makes the best use of their limited financial resources.

Expectations

- Aid recipients should attend all lessons, classes and ensembles for which she/he is registered. If recipient is unable to attend a session, the aid recipient will notify the appropriate program staff at 256-543-2787. Repeated absences will jeopardize a recipient's financial aid eligibility.
- The aid recipient should be on time for all lessons, classes and ensembles.
- Recipients should bring appropriate materials to lessons, classes and ensembles.
- Recipients will practice and prepare for each session according to requirements designed by the student and instructional staff.
- Aid recipients must pay tuition bills, fees, etc. not covered by financial aid.

If the expectations of the agreement are fulfilled, the aid recipient will receive preference for continued financial aid for the next semester of the current academic year.

I certify that I have read and understand the above expectations.

Student name _____ Student signature _____

Parent(s)/Guardian(s) name _____

Parent(s)/Guardian(s) signature _____

Completed Financial Aid Application, along with all requested documentation, may be mailed to:

**Funds for Access
Gadsden Cultural Arts Foundation
P.O. Box 1507
Gadsden, AL 35902
Attn: Susie Collins**

Financial Aid Application Statement of Financial Need

Student name _____

Parent(s)/Guardian(s) name _____

Please use the space below to provide a statement of need, written by the parent or guardian for the student named above. This statement should document why you are seeking financial aid and any additional information you wish for the committee to consider when determining awards and award amounts. As funds are limited, it is important that financial needs are explained in detail.

Parent(s)/Guardian(s) signature _____

Financial Aid Application Student Essay

Student name _____

Please write a short essay describing your art/music/dance experiences and ambitions. Please provide information about yourself, including biographical information, art/music/dance passions and interests, and information about artistic endeavors you have or are participating in. How will receiving funds from the Funds for Access assist your artistic future?

Student signature _____