



ORCHESTRA SCHOOL OF THE HUDSON VALLEY

P.O. Box 1806 ~ Poughkeepsie, NY 12601 ~ (845) 264-1206 ~ www.stringendoweb.org ~ stringendo.info@gmail.com

Financial Aid Request Form

Stringendo, Inc. is a private, non profit organization with a mission to provide quality music education and a supportive musical community for students. Stringendo provides scholarship funds for children in families that exhibit financial need to attend orchestras, fiddle classes, or Summer Strings. **Scholarship applications must be submitted by deadline posted on our website, accompanied by a completed registration form (Summer Strings only) and a \$25 registration fee.** If you do not receive a scholarship award that meets your needs, you are entitled to a refund of the registration fee (must be requested within 10 days of scholarship notice).

To apply for a scholarship, please send:

1. Completed scholarship request form
2. Completed program registration form (Summer Strings only)
3. Registration deposit for program (\$25 per program)

Parent/Guardian Name _____

Address _____

State _____ ZipCode _____

Child's Name _____

Age _____ Instrument _____ Years of Study _____

For which program(s) are you applying for financial aid:

Stringendo Orchestras Strawberry Hill Fiddlers Summer Strings

1. How many members in your household? _____ Number of dependent

children _____ Ages _____

2. Is your child eligible for free or reduced price school lunch? yes no

Notice of Non-discriminatory Policy: The Stringendo Orchestra School admits students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs.

3. Do you currently receive funds from the department of social services?

_____yes _____ no

4. Do you currently receive unemployment? _____ yes _____ no

3. What is your total household gross annual income (pre-tax) for last year? Include

ALL sources of income except earnings of minors. _____

4. Monthly Family Expenses

Rent / Mortgage Payment _____

Average Monthly Utilities _____

Other Monthly Expenses _____ (describe)

5. Please describe in detail why participation in a Stringendo program would be important for your child.

6. Please provide any additional information that would help us access your need for financial assistance.

I attest that the information I have provided is true to the best of my knowledge.

Signature _____ Date _____

Return with your deposit to: Stringendo, Inc.
PO Box 1806
Poughkeepsie, NY 12601

For Office Use Only:

Date Received _____ Amount awarded _____ Date notified _____