



## Financial Assistance Application

**Purpose:** This form is to be completed by a student/parent wishing to receive financial assistance to offset tuition at the Uptown Music Collective. Please note, if you are currently receiving a scholarship from the Uptown Music Collective, you are not eligible for Financial Assistance.

### Application Address:

Uptown Music Collective  
Attn: Assistant Director  
144 West Third St. Suite 201  
Williamsport, PA 17701

**Financial Assistance Determination Process:** The UMC Scholarship Committee will review the application and determine if financial assistance will be granted based on a sliding scale system. The student/parent must re-apply each semester to continue to receive financial assistance and **MUST** notify the Uptown Music Collective of any changes to their financial status immediately.

### Complete Criteria:

- Applicants must show financial need
- Applicants should partake in the maximum number of classes and workshops allowed
- Applicants are encouraged to participate in all recitals, special events, and volunteer activities (whenever available)

### Required attachments (if any required items are not submitted your application will not be considered):

- Completed application;
- Parents' (or those responsible for paying UMC Tuition) most recent tax return (the first two pages of your 1040 form);
- Parents' (or those responsible for paying UMC Tuition) most recent 4 pay stubs;
- *Note: Please black out your Social Security Number on these documents*
- *Note: Please make us aware of anyone contributing to paying tuition at the Collective that is not the student's parent/guardian*
- *Note: Please make us aware of any other sources of income or support the family receives.*
- Parents may write a letter indicating any unusual or personal circumstances which warrant the need for financial assistance, especially if they feel the need for assistance will only be temporary.

### Additional Financial Assistance Requirements:

- Student will, according to his/her instructors, show progress and a desire to learn in all UMC classes, workshops and lessons;
- Student will demonstrate proper behavior and etiquette at the UMC and its events and follow all policies of the UMC as outlined at <http://uptownmusic.org/umc-policies-and-procedures/> "Proper Behavior" shall be determined at the full discretion of the administration
- Student will be evaluated at the end of each semester by his/her private lesson, class, and workshop instructors as well as the UMC Scholarship Committee

### Questions please contact:

Uptown Music Collective  
Phone: 570-329-0888  
Email: [jared@uptownmusic.org](mailto:jared@uptownmusic.org)



### Financial Assistance Application

\_\_\_\_\_ Miss \_\_\_\_\_ Mr. \_\_\_\_\_  
STUDENT NAME

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY STATE ZIP

\_\_\_\_\_  
HOME PHONE CELL PHONE EMAIL

\_\_\_\_\_  
DATE OF BIRTH ARE YOU CURRENTLY A UMC STUDENT?

List parents' or guardians' names and email addresses (and street addresses if not the same as student):

_____ NAME	_____ NAME
_____ ADDRESS	_____ ADDRESS
_____ HOME PHONE	_____ HOME PHONE
_____ CELL PHONE	_____ CELL PHONE
_____ EMAIL ADDRESS	_____ EMAIL ADDRESS

List all siblings and household dependents. Give age, college, or occupation:

_____	_____
_____	_____
_____	_____

Would you or your student be able to attend the Uptown Music Collective if you do not receive Financial Assistance? \_\_\_\_\_

What would you be able to afford per month if you are eligible for Financial Assistance? \_\_\_\_\_

#### Financial Information/Certification \*Signatures are required\*

I hereby affirm that the information on this form and all attachments is true and complete to the best of my knowledge. I am aware of the conditions under which financial assistance is made and promise to inform the Uptown Music Collective of any change in circumstances.

I understand that tax return forms provide information to be used in the consideration for financial assistance made by the Uptown Music Collective. The information submitted is held in strictest confidence.

I hereby authorize the Uptown Music Collective to share this information with members of the Scholarship Committee.

By signing below, you are agreeing to participate in the Uptown Music Collective's programs to the extent agreed upon by your financial assistance. Your participation will be documented and failure to fully participate could be cause to discontinue your financial assistance. Your participation record will also be considered in making the decision to continue the financial assistance to the next term.

\_\_\_\_\_  
APPLICANT'S SIGNATURE DATE

\_\_\_\_\_  
PARENT OR GUARDIAN'S SIGNATURE DATE