



www.seattleconservatory.org

Seattle Conservatory of Music

2009-10 Financial Aid – Work Exchange Application

Contact Information

Phone & Fax: 206.632.6715
info@seattleconservatory.org
417 North 50th Street
Seattle, WA 98103

Note

Application, fees and deposit must be received prior to applying for financial aid/work exchange. Applications will be reviewed beginning July 15. Notification of aid received will be given in August. Financial aid/work exchange contracts must be signed prior to the beginning of the program. The following information will be kept strictly confidential.

STUDENT NAME

STUDENT LIVES WITH

PARENTS

OTHER

ADDRESS

PRIMARY BILL PAYER

ADDRESS

CITY

STATE

ZIP

DAY PHONE

CELL PHONE

RELATIONSHIP TO STUDENT

OCCUPATION

EMPLOYER

EMPLOYER'S PHONE NUMBER

ANNUAL GROSS EARNINGS

ASSETS

BANK ACCOUNT(S) TOTAL BALANCE

STOCKS/BONDS

CAR MAKE/MODEL/YEAR

REAL ESTATE VALUE

LIABILITIES

OWN

RENT

HOME

MONTHLY PAYMENT

CREDIT CARD DEBT

NUMBER OF DEPENDENT CHILDREN

OTHER DEPENDENTS

PLEASE LIST OTHER FACTORS WE SHOULD CONSIDER

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SECONDARY BILL PAYER

ADDRESS (IF DIFFERENT FROM PRIMARY) CITY STATE ZIP

DAY PHONE CELL PHONE

RELATIONSHIP TO STUDENT OCCUPATION

EMPLOYER EMPLOYER'S PHONE NUMBER

ANNUAL GROSS EARNINGS

ASSETS

BANK ACCOUNT(S) TOTAL BALANCE STOCKS/BONDS

CAR MAKE/MODEL/YEAR REAL ESTATE VALUE

LIABILITIES

HOME OWN RENT MONTHLY PAYMENT CREDIT CARD DEBT

NUMBER OF DEPENDENT CHILDREN OTHER DEPENDENTS

PLEASE LIST OTHER FACTORS WE SHOULD CONSIDER

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Amount of aid requested (maximum 50% of tuition) \$

I hereby state that all of the above information is correct to the best of my knowledge. I understand that financial aid/work exchange awards are limited and are exclusively parent work exchange awards. The parent work exchange will earn \$10/hour worked and will be credited to the student's tuition balance.

..... SIGNATURE DATE

..... SIGNATURE DATE

FOR OFFICE USE ONLY		
AMOUNT OF TUITION \$	AMOUNT OF AID AWARDED \$	DATE