



University of Delaware  
Community Music School  
Amy E. du Pont Music Building  
Newark, DE 19716

## UD CMS Confidential Application for Financial Aid

Please type or print legibly

NAME OF STUDENT \_\_\_\_\_

The UD CMS Confidential Application for Financial Aid consists of two parts: (1) Applicant History Form, (2) Financial Information Form. The Financial Information Form should be accompanied by a **copy of your most recent US tax form (1040, 1040A, 1040EZ, or I-20 for international students)**. Please black out Social Security numbers on tax forms. These forms should also be accompanied by the appropriate UD CMS registration form. Only completed applications are considered.

No money changes hands from UD CMS to the recipient of any financial aid. Awarded aid is deducted from total tuition fees and all remaining charges must be paid in full by applicant/applicant guardian. Awards are granted for the entire school year but a re-enrollment form for each session must be sent in order to be enrolled in each subsequent semester for the year (i.e.-Fall, Winter, Spring, Summer).

Acceptance of financial aid from UD CMS creates an obligation on the part of the student and the parent. Classes/lessons must be attended regularly and an appropriate amount of effort should be evident. UD CMS reserves the right to withdraw financial aid if it is determined that the appropriate dedication is not being shown through the recipient's behavior or actions otherwise with UD CMS.

Withdrawal from UD CMS programs in the midst of an academic year in which financial aid has been awarded will result in revocation of the award except in special circumstances that must be approved by UD CMS.

Financial Aid is granted as a percentage of registration cost for each semester. Programs that are eligible for financial aid include: 30 minute private lessons (additional time may be added at regular rates), Suzuki, Ensembles, Group Classes, Music for Young Minds, Choirs, DE Youth Wind Ensemble, and Camps. Financial Aid may not be used in combination with any other discount.

Granting of financial aid does not guarantee future financial aid. Awards are given on an annual basis and reapplication is required for each new academic year. Confirmation of receipt of financial aid will be sent to applicant via email and response must be received by UD CMS within two weeks. Failure to meet this deadline will be considered as declining our offer of financial aid.

Completed forms (Applicant History Form, Financial Information Form (with copies of most recent tax forms), and UD CMS registration form) should be mailed or hand delivered to:

University of Delaware  
Community Music School  
Amy E. du Pont Music Building  
Newark, DE 19716-2560

I have read, understand, and accept the above conditions to UD CMS financial aid.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date



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## Part 1 - Applicant History

### UD CMS Confidential Application for Financial Aid

Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_ Relationship to Student \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Class/Lessons for which you wish to register \_\_\_\_\_

Other anticipated CMS classes, ensembles \_\_\_\_\_

Number of years of previous private instruction \_\_\_\_\_

Name of most recent private instructor \_\_\_\_\_

Number of years and type of other music instruction \_\_\_\_\_

Notable achievements or awards \_\_\_\_\_

FOR CMS USE ONLY	
Date Application Received _____	Received by _____
Amount of Financial Aid	FALL SEMESTER \$ _____
	WINTER SEMESTER \$ _____
	SPRING SEMESTER \$ _____
	SUMMER SEMESTER \$ _____
Director's Signature _____	Date _____



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Part 2 - Financial Information
UD CMS Confidential Application for Financial Aid

Required

Attach most recent Tax Form 1040, 1040A, 1040EZ, or I-20 for international students

Table with 3 columns: Description, Actual Last Tax Year, Estimated Current Tax Year. Rows include Household gross income, Non-taxable income (with sub-items like Social Security Benefits), and Total Income.

List and explain additional expenses not reflected in adjusted gross income (including the total costs of all dependents attending a higher learning institution – actual out of pocket expenses after aid and scholarships and the number of months the primary and/or secondary wage earner has been unemployed this current calendar year):

Two horizontal lines for listing additional expenses.

Explain any other special circumstances that bear on your need for financial aid: (attach separate page if necessary)

Three horizontal lines for explaining special circumstances.

Total Number of dependents living within your household supported by this income \_\_\_\_\_

Names of other household members studying at the CMS \_\_\_\_\_

Dependent student applicant's earned income outside the home:
a. Amount earned during most recent school year \$ \_\_\_\_\_
b. Amount earned during past summer \$ \_\_\_\_\_
c. Estimate amount to be earned this school year \$ \_\_\_\_\_

To the best of my knowledge, the information given on this form is complete and correct.

Signature of person completing this form \_\_\_\_\_ Date \_\_\_\_\_