CLASSICAL SINGING AND NEW YORK IN JUNE 2023 Financial Aid Form

Section I

Name		
Address		
Phone	Email	
Marital Status		
Do you have any depe	endents?	
If yes, how many, and	l ages	
	Section II	
Financial resources avassistance, etc.):	vailable for this coming summer (sa	avings, loans, scholarships, family
Jobs you have held in	the previous year (state amount ear	rned for each job):
Total college/universi	ity costs this year (room, board, tuit	tion):
Total college/universi	ity scholarship available for this aca	ademic year:
Total student loans:		
Name of college/univ	ersity:	

Did you pay Federal Income Tax for this year? If yes, please give amount:
Do your parents list you as a tax exemption on their Federal Income Tax return?
YES/NO
Father: 2022 Gross Income
Mother: 2022 Gross Income
Other dependents (include ages, relationships, partial or full dependency):
Student: Gross Income for 2022
Is there anything else you would like us to know with regard to your financial situation and request for assistance?
I hereby certify that the information contained in this application is substantially accurate and complete. If any change occurs after I submit the application, I will notify CSNY in June immediately. I further certify that if I am granted scholarship assistance, I agree to be present for all activities for the full duration of the CSNY in June program.
Signature of Applicant Date