FALL 2020 6-WEEK VIRTUAL PROGRAM

Oregon Repertory Singers has limited financial aid funds available to assist qualifying families with tuition for the ORS Youth Choir 6- Week Virtual Musicianship Class. Many factors are taken into consideration when reviewing financial aid applications, including household income, federal low income and poverty guidelines, extenuating household circumstances, demonstrated interest in the program, and Oregon Repertory Singers' overall financial aid budget for the year. This document includes instructions, deadlines, and the application form for scholarship.

Please call 503-230-0652 or email office@orsingers.org with questions.

FINANCIAL AID APPLICATION DEADLINE

• October 15th Online enrollment form completed and and Scholarship Application Due

FINANCIAL AID DISBURSEMENT AND ADDITIONAL FEES

- Scholarship recipients must be enrolled online by October 15th.
- Scholarships will be awarded and announced to families by October 19th.
- Scholarships recipients will be required to pay any remaining tuition by October 23rd. Please work directly with the ORS office at office@orsingers.org.

HOW TO APPLY FOR A SCHOLARSHIP FOR ORSYC

1. Complete the online enrollment form at www.orsingers.org.

When completing the additional questions during the online enrollment process, indicate YES where asked if you plan to request financial assistance. On the final check out screen of enrollment, enter "scholarship" as a coupon code. This code will eliminate your tuition costs and still allow you to enroll. You must complete your online enrollment before applying for a scholarship. Completing this step will hold your place in the class. You will not be asked to make a tuition payment, if any, until after scholarships have been awarded. Any remaining tuition owed will be due by October 23rd.

- 2. Complete your scholarship application & assemble the required supporting materials.
- 3. Return the application & attachments by October 15th to the ORS office by email: office@orsingers.org

CONTACT INFORMATION

Parent/Guardian Information – Primary Contact Name: Primary phone: _____ (home / cell / other) Alternate phone: _____ (home / cell / other) Email: _____ Alternate Email: _____ Mailing Address: _____ Occupation: Parent/Guardian Information – Secondary Contact (if applicable) Primary phone: _____ (home / cell / other) Alternate phone: _____ (home / cell / other) Email: _____ Alternate Email: _____ Mailing Address: _____ Occupation: **Student Information** Age as of October 20th^h: School grade as of October 20th^h: School: Second and Third Student Information (if applicable)

Name: _____

Age as of October 20th ^h :	School grade as of October 20th:	
School:		
Name:		
Age as of October 20th:	School grade as of October 20th:	
School:		

FINANCIAL INFORMATION AND ATTACHMENTS

	On	this page.	please	provide i	nformation	according t	to the	most recentl	v com	pleted tax v	vear.
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HOUSEHOLD
Total persons in household: Total dependents in household (included in line above):
FINANCIAL
Please provide your TOTAL annual household income below. Please provide gross (pre-tax) amounts, and include earnings/subsidies/etc from all adults supporting the child(ren)'s primary household. If your income has changed significantly since your last completed tax return, please provide additional information on the last page.
Annual by category
Earnings (salary, wages, commissions, etc) \$
Agency subsidy (SSI/D, TANF, SNAP, etc) \$
Other (alimony, child support, investments, property, etc) \$
Total Annual Household Income: \$
Please indicate the TOTAL amount* your family could pay toward tuition: \$* * If you are a multi-child household, please include total tuition for ALL students.

ATTACHMENTS

Please provide the following attachments when submitting your completed scholarship application.

All applicants:

- 1. A copy of your household's most recent tax return and/or pay stubs from the last 3-6 months.
- 2. Documentation verifying agency subsidies or other income as indicated in this application.

PARENT/GUARDIAN STATEMENT

By signing below, I agree to share the enclosed information with the Oregon Repertory Singers staff and board, and I confirm that the information provided in this application is complete and accurate to the best of my knowledge.

Parent/Guardian Signature: _	
-	
Date:	

ADDITIONAL INFORMATION (OPTIONAL)

Please use this page to provide a statement or explanation that details any extenuating circumstances or other information that may be useful upon reviewing your application. Examples may include extended unemployment, physical or mental health concerns, housing or transportation concerns, family crises, etc.