

Financial Aid Application

*Financial aid is available for those individuals wishing to study at the Community Center for the Arts who have a degree of financial constraint that does not enable them to supply the full tuition and fees payment. If you would like to be considered for financial aid, please fill out the following information completely (one form per applicant, please). All applications will be reviewed and recipients will be determined by the CCA board. **Financial aid will be dispersed according to available funds.***

FULL NAME: _____

PARENT NAME (IF APPLICABLE): _____

CIRCLE ONE: M F AGE: _____ GRADE _____

BIRTHDATE: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

DO YOU ATTEND GULF TO LAKE CHURCH? Y N

ARE YOU A MEMBER OF GULF TO LAKE CHURCH? Y N

DO YOU ATTEND CHURCH ELSEWHERE? Y N

IF SO, WHERE? _____

HOW ARE YOU CURRENTLY INVOLVED IN MUSIC/DANCE?
ex. Band, chorus, church choir, etc.

PLEASE LIST ANY PREVIOUS MUSIC/DANCE EXPERIENCE.
ex. Band, chorus, church choir, etc.

DO YOU RECEIVE ANY OF THE FOLLOWING?

_____ Government Financial Assistance _____ Food Stamps
_____ Earned Income Tax Credit _____ Subsidized Housing
_____ Other (please list) _____

WHY WOULD YOU LIKE TO STUDY AT CCA AND WHY WOULD YOU LIKE TO BE CONSIDERED FOR FINANCIAL AID? _____

IMPORTANT!!!

In the event that I am awarded financial aid towards my tuition cost at CCA, I hereby agree to comply with all policies and procedures as outlined in the student handbook, including completion of the entire 15 week semester and participation in the end-of-semester recital. If I do not adhere to all of these policies, I understand that I will be expected to make reimbursement to CCA/Gulf to Lake Church for the financial aid portion that was awarded to me in full.

Student Signature: _____

Parent Signature (if applicable): _____

Please return this document with your first tuition payment and registration fee, **no later than one week before classes begin.**

If you are awarded financial aid, it will be applied to the remaining tuition balance.

Gulf to Lake Church Music Department

ATTN: CCA ADMINISTRATOR

1454 N. GULF AVE. CRYSTAL RIVER, FL 34429

For Official Use Only:

Semester: __Fall __Spring Year 20__

Board Decision: __Approved __Not Approved

Amount Given: _____

Board Members Present: _____

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