



990 Pelham Parkway South ~ Bronx, NY 10461

☎: 718-792-1800 ~ 📠: 718-792-6802

🌐www.bronxhouse.org

Request for Financial Aid

Student Name: _____ Date of Birth: _____

Parent Name: _____

Home address: _____

Phone: _____ Email: _____

1. Last year's total income (1040, Line 7) : _____.

Please provide a copy of your most recent 1040

2. Are you currently employed? Yes No

If you circled 'no,' please provide proof of unemployment

3. Other sources of income: _____

4. Name and ages of all persons supported by income listed in #1:

5. Other unusual expenses (debt, medical, etc):

6. Name of program applying for (ie private piano, Hip Hop 1, etc):

7. Cost of program: _____

8. I can afford to pay: _____ (Does not include insurance information)

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I understand that submission of this application does not ensure that I will receive scholarship funding. I understand that any and all scholarship awards are valid through June 30, 2023.

I certify that the information provided above is true and accurate. I give permission to Bronx House, and whomever they may designate, to verify any information that I have supplied.

I understand that some funding sources require the names and ages of tuition assistance recipients. If requested, I authorize the release of this information.

Signature: _____ Date: _____

For office use only:

Disposition by Tuition Assistance Committee:

Last year's tuition assistance: \$ _____

This year: \$ _____

Approved: _____ Date: _____