



990 Pelham Parkway South, Bronx, NY 10461

718-792-1800

[www.bronxhouse.org](http://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? (circle one) : Yes No  
(If you circled "No", please provide proof of unemployment)

3) Other sources of income: \_\_\_\_\_

4) Names and Ages of all persons supported by income listed in #1:

5) Other unusual expenses (debt, medical, etc.) \_\_\_\_\_

6) **Name of Program Applying For:** **Cost of Program Applying for:** **I can Afford to Pay:**  
(eg. 30min Piano, Acting 1, Violin 2) (use community rate if not a member)

1.	\$	\$
2.	\$	\$
3.	\$	\$



## Request for Financial Aid

(cont.)

*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, 2024**.*

*I certify that the information provided 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: \_\_\_\_\_

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### For office use only:

Disposition by Tuition Assistance Committee:

Last Year's tuition assistance: \$ \_\_\_\_\_

This year: \$ \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_