

New England Youth Theatre
100 Flat Street, Brattleboro, Vermont 05301
Tel. (802) 246-6398, ext. 101
Email michelle@neyt.org
www.neyt.org

Application for Financial Aid

This form must be submitted with a copy of your most recent Federal tax return, no later than _____

Please provide all of the information requested below.

Parent's/Guardian's Name:	Tel.
---------------------------	------

Address:

Student's Name:	Age & Grade:
-----------------	--------------

Class or Production Registered for:

Financial Information (Information provided will be kept confidential)

Parent's/Guardian's Name #1:	Occupation.
------------------------------	-------------

Place of employment:

Parent's/Guardian's Name #2:	Occupation.
------------------------------	-------------

Place of employment:

Household Income:	No. of members in household:
-------------------	------------------------------

Housing: Own <input type="checkbox"/> Rent <input type="checkbox"/>
--

Other sources of income (gifts, child support, etc.); Please specify:

Please attach a copy of your most recent 1040 income tax return with this application. Applicants cannot be considered for financial aid without this information. Please attach a separate sheet for your comments if there are any special considerations that you feel should be taken into account.

I,, state that the above information is accurate and complete, and I understand that the financial aid reward will be applied to tuition and that I am responsible for paying the outstanding balance on or prior to the first day of class/rehearsals.

Date:

***Please Note:** A deposit is still required and will be applied to the tuition charge.