



Financial Aid is available for musicians whose families demonstrate qualified need. Families are responsible for completing the Fundraising Expectations as they are outlined in the 2018-19 Handbook and musicians may be asked to act as Manager's Assistants. If submitting this form, please do not make a tuition payment at this time.

**Incomplete applications are not considered.**  
**All financial and personal information is held in strict confidence.**

For this application to be considered complete, please be advised of the following:

- This form must be accompanied with a copy of the first 2 pages of each supporter's most recently filed IRS Income Tax Return (1040 or 1040A).
- Please use a dark permanent marker to conceal any social security numbers listed on all included forms.
- Musician for whom assistance is sought MUST be listed as a "Dependent" on line 6c of the included 1040 or 1040A.
- These materials MUST be sent, via US Mail, to ESYO at Proctors, 432 State St., Schenectady, NY 12305.

**Applications must be received no later than Friday, July 27, 2018.**

Musician's Name	ESYO Ensemble(s)	
Please provide answers to the following:	Actual Last Completed Tax Year	Estimated Current Tax Year
1. What is your total adjusted gross income? <i>(form 1040: line 37, or form 1040A: line 21)</i> Include combined TOTAL of adjusted gross income for ALL supporters.	\$	\$
2. Non-taxable income and/or benefits (listed below) received by your family:  Social Security                      Unemployment Compensation Family Gifts or Support            Interest on Tax-Free Bonds Child Support                         Untaxed Portions of Pensions Welfare                                 Housing Allowance	\$	\$
3. TOTAL INCOME <i>(add lines 1 and 2)</i>	\$	\$
4. Other: Please list any extenuating circumstances and subsequent financial implications that show your need for financial aid.		
5. Household size: Please indicate the total number of persons living within your household who are dependent on this income:	HOUSEHOLD SIZE	
6. Unemployment: Enter the number of months the primary and/or secondary wage earner was unemployed during the actual last completed tax year and the approximate monthly impact:	PRIMARY	SECONDARY
7. <b><i>The signature(s) below affirm that the information contained within this form and its attachments are accurate, true and complete to the best of my knowledge.</i></b>		
Signature _____ Printed Name _____		
Date _____ Relationship to Musician _____ Phone _____		
Signature _____ Printed Name _____		
Date _____ Relationship to Musician _____ Phone _____		

**MAIL TO THE ESYO OFFICE BY FRIDAY, JULY 27, 2018**  
**ESYO At Proctors, 432 State Street, Schenectady, NY 12305**