Stony Brook University Community Music Programs

MUSIC BASICS FOR KIDS AND CHILDREN’S CHOIR

Application for Admission
2009-2010

Please type or print clearly and answer all questions completely.

Student's Name: _____________________________ Sex: Female Male
  First    Middle   Last

Mailing Address: ____________________________
  Street address

  City State/Province       Zip/Postal Code

Email Address: ____________________________

Age: _______ Date of Birth: _________________ Grade in school (as of September 2009): _________________

Have you previously enrolled in the Music Basics for Kids Program? YES NO If so, when? _________________

Father’s/Guardian’s name: ____________________________

Mother’s/Guardian’s name: ____________________________

Home phone number: _____________________________ Emergency Number: _____________________________

Email address: ____________________________ *(required – please print carefully)*

I certify to the best of my knowledge and belief the information offered above is true and complete. I understand that the application fee is non-refundable.

Parent Signature _____________________________ Date ____________

Mail your completed application and fee to:
Community Music Program
Department of Music
3304 Staller Center
Stony Brook, NY 11794-5475

Applications received after September 1, 2009 may still be considered but are not guaranteed acceptance.

You have completed the Admissions portion of this application.

If you wish to apply for Financial Aid, please continue with the application
Applications for Financial Aid will not be considered unless all of the following questions are answered in detail. Personal and financial information is held in the strictest confidence. Financial Aid for the Pre-College Program is limited and we cannot guarantee assistance.

Without financial aid, will you be unable to enroll in the Community Music Program?  YES  NO

Section A Parent/Guardian Information

Father’s Employer: ______________________________________________________________

Position held ___________________________  Length of time employed ___________________________


Mother’s Employer: ______________________________________________________________

Position held ___________________________  Length of time employed ___________________________


Total household income $ ___________________________

Total anticipated contribution to Community Music Programs tuition: ___________________________

If your income was earned in the United States, include a copy of your 2008 Federal Income Tax Return with this application.

If your income was earned outside of the United States, please provide official documentation of income, translated into English, with this application.
List any private school / program where the applicant is enrolled and any financial aid the applicant is receiving.

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<th>Program/School</th>
<th>Financial Aid received</th>
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List any other children in the family that are enrolled in a private school / college:

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<tr>
<th>Program/School</th>
<th>Tuition</th>
<th>Financial Aid received</th>
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Please provide any additional information pertinent to your application for Financial Aid (Your expenses breakdown, family circumstances, etc.):

If I receive financial aid, I agree that no outside activities will interfere with the schedules assigned by the Community Music Program. I understand that an unsatisfactory attendance record is reason for the financial aid to be withdrawn. I certify that to the best of my knowledge the information offered above is true and complete. I also understand financial aid will not be applied until a tuition contract is agreed upon and signed by the Director.

Parent Signature ____________________________ Date ____________