

## **ARTS+ Charlotte Children's Choir Sliding Scale Tuition Form**

T S	Student Information			
☐ New Student☐ Returning Student☐			<ul><li>I have received previous tuition support</li><li>I have NOT received previous tuition support</li></ul>	
	_			
City:	State:		Zip Code:	
Date of Birth	: Age:	Gender:	Ethnicity: (optional):	
School (curre	ent):		Grade (current):	
Home Phone	Ž.	Other/Ce	II:	
Email:				
Parent Name: Work Phone:				
, -			THORIC.	
Tiow dia you	Tiedi about Arts+:			
<b>Please list</b>	financial assistance	received per y	ear from the following sources:	
form as a decay. What are the second of the	ependent(s)?  The total wages of the other pare serve any other allotment of monomilies with dependent childrent ic aid: monthly Food Stamps/Will and/or child support?  The ecurity?  The come (retirement, disability, under the total number in your he copy of your latest income to ment documentation).  The extenuating circumstances we	nt/guardian? nies from agencies reprin? IC? employment, etc.)? busehold as indicated of ax return OR any others should know for consider provide those for us.	Amount: \$	
understand the cooperation, of information of Arts+. Please	nat tuition support may be we endeavor and achievement s on any part of this applicatio	vithdrawn from any satisfactory to Arts+ n will disqualify me	d procedures and agree to adhere to them. I student who does not maintain a good record of I understand that providing false or misleading from any current or future tuition support from I if this application is incomplete.  Date:	