Application for Music Department Financial Assistance on Behalf of Students Taking Performance Courses

<table>
<thead>
<tr>
<th>Semester</th>
<th>FALL</th>
<th>SPRING</th>
<th>Year</th>
<th>20__</th>
</tr>
</thead>
</table>

Student Name _______________________________ Grad Year ________

ID # ___________________________ Phone # ___________________________

Instrument ______________ Teacher ___________________________

On Financial Aid? (circle one) YES NO

Extent of the Student’s Need (circle one) Moderate Extreme

Please add below any information which may be pertinent, such as family financial situation or involvement in the music department. Determination of music department aid grants may be partly based on need as determined by the Smith College Financial Aid office.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Student _______________________________ Date ________________

(signature)

For Office Use

Amount Awarded ______________ Fund ___________________________

Chair ___________________________ Date ________________

(signature)