

STUDENT INFORMATION

11. List all **post-secondary** (after high school) institutions you have attended. (Attach an additional sheet if necessary.)

If none, skip to question 13.

<u>NAME OF SCHOOL</u>	<u>LOCATION</u>	<u>DATES</u>	<u>DID YOU RECEIVE FINANCIAL ASSISTANCE?</u>
1) _____	_____	_____	_____
2) _____	_____	_____	_____

12. What is your current outstanding student loan balance from the following sources?

\$ _____ Federal student loans (include FFELP and Direct Loans)

\$ _____ Non-Federal student loans

13. Did you file, or will you file, a 2018 U.S. Federal Income Tax Return or, for international students, a 2018 tax form in your country of residence? Please forward a signed copy of the tax return with this application or as soon as completed.

___ Yes ___ No

14. Please list the current value of your assets as of the date this application is filed. (student)

\$ _____ Cash, savings, and checking accounts

\$ _____ Stocks, bonds, and certificates of deposits

\$ _____ Mutual funds and/or other investments

\$ _____ Trust funds (even if not redeemable this year)—enter the total value of fund

15. Please indicate any prizes/scholarships/awards received in the past twelve months. Include the dollar value of the award. Will these be renewed for 2019-20? _____

16. List **estimated personal resources** you will have towards payment of your living expenses for the **2019–20 school year**. (Do not include work-study earnings.)

\$ _____ Parent and family contribution

\$ _____ Student savings and investments

\$ _____ Estimated summer 2019 earnings

\$ _____ Sponsor contribution

\$ _____ Off-campus/regular employment during academic year (estimated)

\$ _____ Off-campus/gigs and other one-time performances during academic year (estimated)

\$ _____ Awards and/or outside scholarships: _____

\$ _____ Veteran Benefits – Please specify Chapter: _____

\$ _____ Other: _____

\$ _____ **Total 2019-20 estimated personal resources**

17. Explain any special circumstances you wish the Curtis Financial Assistance Committee to consider when reviewing your application. (Attach a separate sheet if necessary.)

PARENT INFORMATION (Required of all applicants for financial assistance)

18. Parents' Marital Status: Married Divorced Separated
 Mother living, father deceased Father living, mother deceased
 Other: _____

19. Check one: Father Stepfather Male guardian Sponsor

 NAME AGE OCCUPATION

 EMPLOYER JOB TITLE

20. Check one: Mother Stepmother Female guardian Sponsor

 NAME AGE OCCUPATION

 EMPLOYER JOB TITLE

21. Give the following information for those who are financially dependent on your parents or guardian, such as a brother, sister, or grandparent. (Attach additional sheet if necessary.) Do not include yourself.

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE</u>	<u>2019-20 EDUCATIONAL INSTITUTION</u>
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- 1) _____
- 2) _____
- 3) _____
- 4) _____

22. Did your parents file, or will your parents file, a 2018 U.S. Federal Income Tax Return or, for international students, a 2018 tax form in your country of residence? Please forward a signed copy of the tax return with this application or as soon as completed.

Yes No

23. Please list the current value of your parents' assets as of the date this application is filed.

- \$ _____ Cash, savings, and checking accounts
- \$ _____ Stocks, bonds, and certificates of deposits
- \$ _____ Mutual funds and/or other investments
- \$ _____ Net value of parent's primary residence (current market value minus any outstanding mortgages)
- \$ _____ Net value of all other properties (land, rental properties, second homes, etc.)

Please explain: _____

\$ _____ Net value of business, if owned by family (assets minus liabilities from most recent balance sheet)
Please attach supporting documentation, including a copy of the balance sheet and tax return.

24. Will your current health insurance policy continue to provide coverage for the student in 2019-20?

Yes No

REQUIRED CERTIFICATIONS

All U.S. Citizens and Permanent Residents ARE REQUIRED TO READ AND INITIAL THE FOLLOWING STATEMENTS.

I affirm that I will use any funds awarded under Title IV programs (Pell grants, all federal loans) solely for educational expenses while I am enrolled at the Curtis Institute of Music.

YOUR INITIALS

I certify that I do not owe a refund and/or that I am not in default on any Pell grant, Supplemental Educational Opportunity Grant (SEOG), Perkins Loan (formerly NDSL), Stafford Loan (formerly GSL), or on any other loan awarded through the Federal Family Education Loan (FFEL) program or the William D. Ford Direct Loan Program.

YOUR INITIALS

I understand that I am responsible for repayment of any funds I receive which cannot reasonably be attributed to meeting my educational expenses while I am enrolled at the Curtis Institute of Music. I further understand that the amount of any repayment is based on regulations published by the U.S. Department of Education.

YOUR INITIALS

International applicants only, COMPLETE THE FOLLOWING QUESTIONS.

Does your government currently impose restrictions on the release, exchange, or amount of funds you may bring with you for study in the U.S.?

___ Yes: maximum amount per year _____

___ No

Will you have a source for emergency funds while you are a student at Curtis?

___ Yes: Who is the source, and what is your relationship? _____

___ No

Do you have permission to work legally in the U.S.?

___ Yes

___ No: Explain _____

All applicants: BY SIGNING BELOW, YOU AGREE TO THE FOLLOWING STATEMENTS:

The information included on this application is true and complete to the best of my knowledge. I agree to inform the Office of Student Financial Assistance of any changes that may affect the information on this application, including any proceeds I receive from work, performances, scholarships, awards, and/or competitions.

I understand that my completed Application for Supplemental Financial Assistance will not be considered until I have submitted all required supporting documents as indicated on the instruction sheet and have been accepted for enrollment at the Curtis Institute of Music.

STUDENT SIGNATURE DATE

SPOUSE SIGNATURE (IF APPLICABLE) DATE

PARENT/GUARDIAN SIGNATURE DATE
(REQUIRED OF ALL DEPENDANT STUDENTS)