



Goodman House
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KaufmanMusicCenter.org
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Scholarship Program Contact: Danny Rivera drivera@kaufmanmusiccenter.org T 212 501 3364

APPLICATION FOR FINANCIAL AID AND MERIT AWARDS

Applications for financial aid cannot be considered unless all of the following questions are answered completely. Personal and financial information will be held in the strictest confidence. **Please submit the *completed form*, together with copies of W-2 forms, a copy of your current year Federal and state income tax returns, and current pay stubs** to the Education Office by the stated deadline. Any application that is received after the stated deadline, or is not completed *in its entirety*, will not be considered.

APPLICATION DEADLINES

Returning Students: May 1, 2022
New Students: June 15, 2022

STUDENT INFORMATION (Please print)

Name of applicant _____
Last/Family First/Given

Name of Academic School _____ Grade in school _____ Date of birth _____ Did
this student receive financial aid from LMS in 2021 – 22? Yes ___ No ___ Amount of Award, if yes? \$ _____

What instrument does the student study? Number of years at Lucy Moses School _____

Name of private teacher(s) at Lucy Moses School _____

Please ask your teacher(s) to submit a letter of recommendation on your behalf for financial aid consideration.
What will you enroll for at LMS? Please be as specific as possible (i.e., private lessons, theory, ballet, theater).

Will you be in the Young Artist Program? Yes ___ No ___

Are there other siblings in the family? Give names and ages; indicate if they are currently students at the Lucy Moses School:

Does the applicant study music or dance at another school or privately? If yes, with whom and where?

PARENT/GUARDIAN INFORMATION

Parent or guardian _____ Relationship _____

Home address _____ Apt. _____

City _____ State _____ Zip _____

Home () _____ Cell () _____ E-mail _____

Employer _____

Nature of business _____ Position held _____ Number of years? _____

Second parent or guardian _____ Relationship _____

Home address (if different) _____ Apt. _____

City _____ State _____ Zip _____

Telephone: Home () _____ Cell () _____ E-mail _____

Employer _____

Nature of business _____ Position held _____ Number of years? _____

FINANCIAL INFORMATION (Explanatory notes can be added on page 3)

| | Current Tax Year 20__ |
|--|-----------------------|
| Salary and wages (Form 1040, line 1) | \$ |
| Taxable Interest (Form 1040, line 2b) and Dividends (Form 1040, line 3b) | \$ |
| Alimony received (Schedule 1, line 2a) | \$ |
| Business Income (Schedule 1, line 3) | \$ |
| IRA distributions (Form 1040, line 4b) | \$ |
| Pension and/or annuity Income (Form 1040, line 4d) | \$ |
| Unemployment Income (Schedule 1, line 7) | \$ |
| Social security and/or Disability benefits (Form 1040, line 5b) | \$ |
| Other taxable income (Form 1040, line 6; Schedule 1, lines 4, 5, 6, or 8) | \$ |
| Total Taxable Income (Form 1040, line 15) | \$ |
| Public Assistance | \$ |
| Child support | \$ |
| Other non-taxable income | \$ |
| Total non-taxable income: | \$ |
| TOTAL INCOME (Total of taxable income+ total of non-taxable income. | \$ |
| Total Federal income taxes paid – (Form 1040, line 24) | \$ |
| Total State Income taxes paid – (Form NYS IT-201, line 46) | \$ |
| Total Local Income taxes paid – (Form NYS IT-201, line 58) | \$ |
| Total Property taxes paid - included in Mortgage payment? <input type="checkbox"/> Yes <input type="checkbox"/> No | \$ |
| Total medical and dental expenses not covered by insurance | \$ |
| Unusual expenses (explain on page 3) | \$ |

Annual housing expenses

| | | | |
|--------------------------|----|--------|--|
| Monthly rent OR mortgage | \$ | X 12 = | |
| Maintenance fees | \$ | X 12 = | |
| Monthly utilities | \$ | X 12 = | |
| TOTAL | | | |

Parent/Guardian Assets – Please answer all questions if they apply.

1. House, co-op or condominium (if owned):

a. Year purchased: _____ b. Purchase Price \$ _____ Current outstanding mortgage: \$ _____

2. Value of other real estate owned \$ _____

3. Total of checking and savings accounts: \$ _____

4. Value of other investments (please give details on page 3) \$ _____

Parent/Guardian Liabilities

1. Total outstanding loans (not mortgages) \$ _____

2. Credit card indebtedness: \$ _____

3. Do you own/lease your own automobile? Yes No If yes, make _____ and year _____

Please use this space to provide explanations of your answers, or to describe any unusual circumstances which we should know in order to evaluate your application.

Signatures of Parents or Guardians

I/we hereby assure that all information supplied on this form is an accurate and true statement.

Parent or guardian signature

Date

Second parent or guardian signature

Date

While optional, the Center asks that you participate in this demographic survey. Information collected is used to improve community engagement initiatives at the Center, and inform grant applications and annual reporting requirements that can increase financial support for the Center's activities.

- | | | | |
|--|--------------------------------|--|---|
| <input type="checkbox"/> Native American/ Alaskan | <input type="checkbox"/> Asian | <input type="checkbox"/> African-American/ Black | <input type="checkbox"/> Hispanic/ Latino |
| <input type="checkbox"/> Native Hawaii/ Pacific Islander | <input type="checkbox"/> White | <input type="checkbox"/> Other (please specify: _____) | |

Kaufman Music Center/Lucy Moses School admits students of any race, color and national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color or national or ethnic origin in administration of its educational policies, scholarship and loan programs, and athletic and other school-administered programs.