

CLASSICAL SINGING AND NEW YORK IN JUNE

2017 Scholarship Application Form

Section I

Name _____

Address _____

Phone _____ Email _____

Marital Status _____

Do you have any dependents? _____

If yes, how many, and ages _____

Section II

Estimated 2016 Gross Income \$ _____ Gross Income 2015 \$ _____

Predicted income for 2017: _____

Earnings/wages \$ _____

Parents/relatives \$ _____

Scholarships/grants \$ _____

Other \$ _____

Monthly Expenses:

Please tell us your average monthly expenses - rent, food, transportation, lessons, etc.

Were you claimed as a dependent on a 2015 Federal 1040 Tax Form? ___ Yes ___ No

Will you be claimed as a dependent on a 2016 Federal 1040 Tax Form? ___ Yes ___ No

If yes, please complete Section III.

Section III

To be completed if you were claimed as a dependent in 2015 or 2016.

Who claimed you as a dependent in 2015? _____

Who will claim you as a dependent for 2016? _____

What was their adjusted gross income in 2015? _____

What is their predicted adjusted gross income for 2016? _____

Please tell us if there are any other details regarding your financial situation of which we should be aware:

Applicant's Signature _____

Date _____