



Work Study Tuition Waiver Grant Application

Student's Name: _____ Age: _____

Street Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Email: _____

School: _____ Grade: _____

Music Teacher (at school): _____

Private Lesson Teacher: _____ Phone: _____

Father: _____ Occupation: _____

Employer: _____

Mother: _____ Occupation: _____

Employer: _____

On a separate page, write a brief paragraph stating why this student is deserving of a work study tuition waiver. If applicable, please list any awards, scholarships or special accomplishments the applicant has received. Also include any outstanding circumstances that Long Bay Symphony staff should know when considering this student for this grant.

*Recipients of this grant must be willing, able and available to assist on a weekly basis with orchestra set-up and teardown, sorting music, and related tasks as assigned and needed by the Youth Orchestra Manager or Director

*Grant application must be submitted to the Youth Orchestra Manager by the LBYS/LBYSE tuition due date.

This information is strictly confidential and for use by the Long Bay Symphony only.