

# Guidelines for Financial Assistance

#### **OVERVIEW**

Financial assistance will be awarded to applicants based upon the available resources of Tacoma Musical Playhouse. TMP will make every effort to provide services for any youth who desires to participate in TMP Education Programs, regardless of ability to pay the full tuition or program fees. TMP is committed to providing financial assistance to families and individuals in need. Financial assistance is available for all of our education programs.

While we are a not-for-profit organization, we depend upon tuition, program fees and donations as well as volunteers to help maintain our services. We are committed, to the best of our ability, to serve everyone regardless of their income, but we do expect participants to pay a fee based upon their financial ability. We strongly urge all applicants to be honest and disclose all household income, as any deception will result in disqualification from the financial aid program for at least one year. **If there is something about your situation that does not fit on this form,** please attach a written page or contact the Director of Education at kayla@tmp.org or (253) 565-6867 to discuss further.

#### APPLICATION PROCESS

Financial assistance applications are processed in the order received. Scholarship awards are limited and may vary in award amount. Eligibility for financial assistance is based on need. Information provided in this application will be kept confidential. After your scholarship is processed, you will receive notice of approval or denial via email with further instructions on how to accept your award. Completion of this application does not guarantee an award will be granted. All decisions regarding financial assistance/scholarships are at the sole discretion of Tacoma Musical Playhouse. If you have further questions, you may contact the Director of Education at kayla@tmp.org or (253) 565-6867.

#### <u>ELIGIBILITY</u>

- 1. Applicants will submit a completed financial assistance application form and all requested information and documentation needed for their application.
- Assistance will be granted on the basis of demonstrated financial need. Need is determined through the amount of immediate dependents in the household, the total household income, and cost of living responsibility (those not burdened with rent or a mortgage will be assigned an in-kind living amount).
- 3. Full disclosure on income verification is required any deceptions will result in an automatic disqualification for the financial assistance program.
- 4. Financial assistance is TEMPORARY and applies only to individual camp/academy session that you indicate in the application. Your application will be re-evaluated before every program you indicated on the application. A new application must be submitted each season.

#### EXPECTATIONS - CAMD THP PROGRAMS

- 1. A financial assistance application does not reserve a space in a camp/academy session. A space is reserved only after registration is completed with at least the \$75 program deposit paid.
- 2. CampTMP financial assistance applies to the cost of the camp session only. Tuition balance must be paid in full before the first day of camp/academy.
- 3. Financial assistance participants have the same privileges as a full paying camper, and are expected to abide by the same policies and rules every participant accepts when using the facility.

#### **Optional** Information

For the purposes of reporting information about the students who participate in our programs to our funders (such as foundations), we also receive grants and scholarships based on this information in some cases.

Which race/ethnicity best describes this student? Please choose one:

\_\_\_\_ American Indian or Alaskan Native, \_\_\_\_ Asian / Pacific Islander,

\_\_\_\_ Black or African American, \_\_\_\_ Hispanic American or Latino,

\_\_\_\_ White / Caucasian, \_\_\_\_ Multiple Ethnicity or Other

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### 2024-2025 Scholarship Application

Student must be registered. For consideration of a scholarship, please fill out this form as completely as possible and return to: **Tacoma Musical Playhouse** Attn: Director of Education 7116 6th Ave. Tacoma. WA 98406 Or email form to: kayla@tmp.org **SECTION A: Student Information Please Print Clearly** Student's School—'24-'25 School Year: Student Name: \_\_\_\_ Student age: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade - '24-'25 School Year: \_\_\_\_ Student Gender: 🔲 Male 🛛 Female **SECTION B:** Parent Information Parent/Guardian E-mail Parent/Guardian Name City Address State Zip Phone # (Home) Phone # (Work) **SECTION C:** For which program are you applying with this application: After-School/Homeschool Academy—FALL | WINTER | SPRING (circle) **Given Saturday Academy 2024 Winter Break Camp** *TMP* (Dec 2024) **2025 Summer Camp TMP** (July-August 2025) Other: **2025 Spring Break Camp** *TMP* (April 2025) **SECTION D: Income** (Gross monthly income for HOUSEHOLD) Minimum of two (2) current months verification is required. Hard Copies Must be Attached. Individual Name Type of Income Gross Monthly Amount \$\_\_\_\_\_ \$ \$ Total \$ **SECTION E: Expenses** Housing / Rent \$\_\_\_\_ Utilities \$ Food \$\_\_\_\_\_ Extenuating Circumstances (\* Include documentation) Monthly Amount Extensive Medical Bills (Hospital / Doctor / Prescriptions) \$\_\_\_ \$ Other: • Do you anticipate any changes in your situation that may impact your need for financial assistance? •

Do you have other children in activities outside of CampTMP? If so, what are they and what is the expense for your family?

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## 2024-2025 Scholarship Application

## <u>SECTION F:</u> This section should be completed by the student (parental assistance is acceptable for younger students, but the ideas and thoughts should come from the student).

Please describe what the performing arts (acting, music, dance) means to you and why you want to attend CampTMP. If this will be your first performing arts experience, tell us why you are interested in trying this.

Type or write legibly in ink. Use separate sheet if necessary.

**SECTION G:** 

I declare that the statements contained herein are true and completely correct to the best of my knowledge. I understand that any deception on my part will disqualify me from receiving financial assistance from Tacoma Musical Playhouse. I hereby authorize verification of information given and will provide any and all requested information needed for my financial analysis for assistance.

If the required information is not furnished, I further understand that my application will be suspended until the requested information is satisfactorily submitted.

Applicant's Signature

Date				

Parent/Guardian	Signature
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Date \_\_\_\_\_