



POST OFFICE BOX 908

MORTON, ILLINOIS 61550

Janice Lukich  
PRESIDENT  
  
BOARD OF DIRECTORS  
Fred Bally  
DeLores Brown  
Mitch Colgan

Jim Haayen  
VICE PRESIDENT  
  
John Donahue  
Shann Elble  
Cynthia Fischer

Dana King  
TREASURER  
  
Sean Jessurun  
David Jones  
Lowell Koons

Michael Lukich  
SECRETARY  
  
Cindy Silver  
Jennifer Suau

(309) 266-7625

(888) 218-4650

WWW.CIYS.ORG

CIYS · CICO · PREP · CADET

## Financial/Tuition Aid Application 2010-2011 Season

### PLEASE COMPLETE THE ENTIRE APPLICATION.

**PLEASE NOTE:** Because financial aid funds are limited, tuition scholarships are awarded based on need. In order to effectively award funds to musicians, the Scholarship Committee asks that you consider your need for tuition assistance prior to submitting this application. Each applicant will be notified in writing of the Committee's decision. *All information provided will be held in strictest confidence.* Please note: CIYS reserves the right to request additional information.

### Personal Information

\_\_\_\_\_  
Musician's Name (Last, First, MI)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State / Zip

Phone \_\_\_\_\_ Email: \_\_\_\_\_

Orchestra:  CIYS  CICO  PREP  Cadet  Ensemble

Instrument: \_\_\_\_\_

Musician is:  New  Returning

### School / Private Study Information

\_\_\_\_\_  
Name of School

\_\_\_\_\_  
Grade for 2010-2011

\_\_\_\_\_  
Music Director's Name

### Parent / Guardian Information

\_\_\_\_\_  
Parent / Guardian's Name

\_\_\_\_\_  
Other Parent / Guardian's Name

\_\_\_\_\_  
Employer / Business Name

\_\_\_\_\_  
Employer / Business Name

\_\_\_\_\_  
Title / Occupation

\_\_\_\_\_  
Title / Occupation

**CONFIDENTIAL FINANCIAL INFORMATION**

Annual gross family income from all sources for 2010:\$ \_\_\_\_\_

*Please attach a copy of the first page of your 2009 Federal income tax return. In cases of joint custody, applicants must report the incomes of both parents. (NOTE: This information will be held in strict confidence).*

Does the applicant wish to have confidential documents: \_\_\_\_\_ Returned; OR \_\_\_\_\_ Shredded?

Do you have other children participating in CIYS organization in 2010-20011? Yes \_\_\_ NO \_\_\_

If yes, list names and orchestra or ensemble:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tuition for 2010-2011:

CIYS \$350  CICO \$350  PREP \$175  Cadet \$175  Ensemble \$175 *(No Additional costs for Ensemble if student is a member of orchestra).*

How much financial aid do you *hope* to receive from CIYS? \$ \_\_\_\_\_

Is the student willing to assist the Orchestra Manager(s) with duties as assigned at weekly rehearsals in exchange for financial assistance? \_\_\_ Yes \_\_\_ No

Are there other sources of financial assistance? (Non-custodial parents, grandparents, etc.) \_\_\_ Yes \_\_\_ No

If **yes**, approximately how much assistance could they provide? \$ \_\_\_\_\_

Are there any special circumstances you feel the Committee should consider while evaluating your application? *(Use additional pages, if necessary).*

-----  
We certify that the above information is true and correct. If awarded financial assistance, we agree to participate in a CIYS orchestra for the full 2010-2011 season.

\_\_\_\_\_  
Musician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian's Signature

\_\_\_\_\_  
Date

**Send completed Application to:**

Scholarship Committee, Central IL Youth Symphony  
P. O. Box 908  
Morton, IL 61550

5/24/10