



**PORTLAND CONSERVATORY OF MUSIC
KARGER PREPARATORY PROGRAM
FINANCIAL AID APPLICATION**

This application must be completed by an adult age 18 or older who is either the legal guardian of children who will benefit from this award or the actual individual who will directly benefit from this award.

Portland Conservatory of Music strives to provide access to music education to students from all financial backgrounds. At Karger we strive to make our offerings accessible to all admitted students. Financial aid scholarships are awarded after admission into the program and based solely on financial need. We also offer 5% military discounts, as well as 5% and 10% discounts for second and third family members studying at PCM. PCM is currently working to expand our scholarship program in order to be able to provide more need-based aid to dedicated students. Please visit our website or call 775-3356 to learn about these programs.

Need-based Financial aid is awarded on an annual basis and is applied to tuition costs from the date of the award confirmation through the academic year. Students must reapply in advance of each new academic year which begins in September. Until an award has been confirmed, full tuition applies, and PCM does not award financial aid retroactively. The amount of financial aid awarded will range depending on each student's financial documentation. Applicants are strongly encouraged to share all pertinent information to most effectively substantiate their need.

This application requires attachment of a copy of the household's most recently filed tax return. If that does not accurately represent the household's current financial situation, please explain that in the area provided below. Applicants who did not file tax returns for the past two consecutive years should provide copies of any documents that substantiate their need (qualification letters for SSI, disability benefits, federal assistance, etc.). All documents are kept strictly confidential.

All students at PCM are expected to attend all classes regularly and be on time, to practice regularly, and to inform their teachers with advanced notice if they must miss a class or session. Failure to attend classes, practice regularly, treat teachers and fellow students with appropriate respect, and meet payment deadlines may result in revocation of financial aid.

If you have any questions about this application, please don't hesitate to call PCM's Executive Director, Jean Murachanian, at 207-775-3356.

Full Name of Individual Completing This Application: _____

Full Name/s and Age/s of Student/s: _____

Address _____ City _____

State _____ ZIP Code _____

Home Phone _____ Cell Phone _____

Email _____

Total Household Income (include all types of income: wages, tips, child support, SSI, federal aid, disability, rental property income, etc.)

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Number of Household Members: _____

(Number of individuals supported by the income above, as indicated on your tax return.)

About the Student/s:

Tell us a little about the student/s who will benefit from this award, including musical history and background, favorite hobbies and activities, developmental or physical challenges, where they attend school, etc. (Please attach a sheet if you need more space).

Financial Picture:

Please include employment status, occupations, employers, etc. for all adults in the household, as well as any unique financial obstacles you are facing, such as medical expenses, job loss, etc. (Please attach a sheet if you need more space).

Attach Supporting Documentation:

Please attach a copy of your most recently filed tax return. If it does not accurately reflect your current financial situation, use the comment area above to explain any recent changes. If you have not filed taxes in the past two years, please indicate that in the comment area above and supply PCM with copies of any documents that substantiate your need (qualification letters for SSI, disability benefits, federal assistance, etc.). If you have any questions, do not hesitate to contact PCM's Executive Director, Jean Murachanian, at (207)775-3356.

By signing this document, you are verifying that all of the information supplied in this application is true and accurate. PCM reserves the right to withdraw any financial aid award if any information supplied is determined to be false.

SIGNATURE: _____ DATE: _____