



## TAMPA BAY CHILDREN'S CHORUS FINANCIAL ASSISTANCE POLICY

The Tampa Bay Children's Chorus (TBCC) recognizes that some children may not be able to participate in TBCC because of financial difficulty.

TBCC uses the following information and guidelines to determine financial need:

1. Eligibility for Free or Reduced Lunch according to Hillsborough County Public School Guidelines.
2. Total Income for the Household.
  - a. Most recent tax return
  - b. Copies of W-2 forms
  - c. Other documentation to support income reported on the tax return.

An application will not be accepted for review unless the application is filled in completely, signed, and all requested documentation is attached.

**All financial assistance is determined on an annual basis, and applications will need to be submitted and approved each year.** All questions and requests for forms and applications should be directed to the Chorus Manager at 813-977-5558.

The TBCC Board of Directors Finance Committee will determine the level of financial assistance to be awarded based financial need and the availability of TBCC funds designated for financial assistance. The family will be notified in writing once this process is completed.

Most families will be asked to pay a minimal tuition \$200 per year per family. Some families will be considered for full tuition assistance based on their family size, income or other financial hardship.

If you do not fall within the financial guidelines and still need financial assistance, the form will be sent to the TBCC Executive Board to be considered for approval. You must be able to give evidence as to why you should be granted an exception. An example would be an illness within the family that has resulted in large out-of-pocket expenses. In this case, you need a report from the insurance company that shows your expenses so that they can be deducted from your income. For changes in income resulting from job loss. You will need to include a copy of the most recent pay stubs from all working members of the family so that the assistance can be based on your current income instead of last year's tax return.

**FINANCIAL ASSISTANCE INCOME GUIDELINES  
2009-2010 SEASON**

The Tampa Bay Children's Chorus (TBCC) Finance Committee will determine eligibility for financial assistance based on Family Size and Income. Income is based on total gross income **before** taxes, social security, health insurance premiums, union dues, and all other payroll or other deductions. The total income before deductions must be reported.

| <b>Household Size</b>                     | <b>Yearly</b> | <b>Monthly</b> | <b>Weekly</b> |
|---|---------------|----------------|---------------|
| 1   | 18,889        | 1,575          | 364           |
| 2   | 25,327        | 2,111          | 488           |
| 3   | 31,765        | 2,648          | 611           |
| 4   | 38,203        | 3,184          | 735           |
| 5   | 44,641        | 3,721          | 859           |
| 6   | 51,079        | 4,257          | 983           |
| 7   | 57,517        | 4,794          | 1,107         |
| 8   | 63,955        | 5,330          | 1,230         |
| For each additional family member - ADD + | 6,438         | 537            | 124           |

The actual dollar value of financial assistance will depend on the annual tuition and uniform requirements for the chorus level in which the child participates.

Financial assistance levels will be determined by TBCC funding availability and the following income limits:

- Families with an annual income below the income guidelines outlined above will be considered for tuition assistance up to the full cost of TBCC tuition.
- Families with an annual income near the income guidelines and up to 20% over the guidelines outlined above will be considered for partial tuition funding.
- No financial assistance will be awarded if actual income is more than 20% above the income guidelines unless there are additional documented financial hardships for the family at the time of the application.

Mail Information to:  
**Tampa Bay Children's Chorus**  
**Attention: Chorus Manager**  
**PO Box 292607**  
**Tampa, Florida 33687-2607**

**Or deliver directly to the chorus manager if during the active season.**

**Every Participant family is asked to pay some part of the cost!**

If you have any question regarding the TBCC's Financial Assistance Program, please call the Chorus Manager at 813-977-5558.

# Tampa Bay Children's Chorus Financial Assistance Program Application

Please complete and sign one application for your family and return the application together with copies of all required paperwork listed in section 7 to:

### Step 1. Contact Information

Mother/Guardian 1 Name: \_\_\_\_\_

Father / Guardian 2 Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Step 2. List each child that has been accepted into TBCC.

| Child's Name | Grade | Choir Place In |
|--------------|-------|----------------|
| _____        | _____ | _____          |
| _____        | _____ | _____          |
| _____        | _____ | _____          |
| _____        | _____ | _____          |

### Step 3. List each person in the household and earned income for each person.

Number of persons in the Household: \_\_\_\_\_

List each person in the Household:

| Name  | Relationship | Age   | Occupation | Gross Monthly Income |
|-------|--------------|-------|------------|----------------------|
| _____ | _____        | _____ | _____      | _____                |
| _____ | _____        | _____ | _____      | _____                |
| _____ | _____        | _____ | _____      | _____                |
| _____ | _____        | _____ | _____      | _____                |
| _____ | _____        | _____ | _____      | _____                |
| _____ | _____        | _____ | _____      | _____                |

Total Monthly Earned Income: \_\_\_\_\_

### Step 4. List any additional household income

| Income Type           | Amount Received Per Month |
|-----------------------|---------------------------|
| Welfare               | _____                     |
| Food Stamps           | _____                     |
| Social Security       | _____                     |
| AFDC                  | _____                     |
| Child Support/Alimony | _____                     |
| Other Assistance      | _____                     |

Total Additional Monthly Income \_\_\_\_\_

Total Household Monthly Income (3 and 4): \_\_\_\_\_

### Step 5. Additional information:

Does any child receive free or subsidized school lunches? Yes \_\_\_ No \_\_\_

Total income of all members of the Household on last year's IRS return. \$ \_\_\_\_\_

**Step 6. Documentation: Please attach copies of the following documents**

- Federal Income Tax Return Tax Form, which has been signed by you.
- W-2 forms for 2007
- Monthly pay roll information if your income has changed since the 2007 tax year.
- If you are not required to file an Income Tax Return, please attach proof of your income such as your welfare check, AFDC Voucher, Social Security check, or child support check.

**NOTE: If these documents are not attached, the TBCC Finance Committee will not be able to review your application for financial assistance.**

**Step 7. Please let us know of any additional information or special circumstances that would assist in processing this application:**

Funds for our scholarship program are gathered through many resources. A tool we use to help gather these funds are quotes and stories from scholarship recipients explaining what Tampa Bay Children's Chorus and the Financial Assistance program has provided for their lives.

**Step 8. Tell us what receiving this Financial Assistance means to you and your children:**

**I certify that the above information is complete and accurate.**

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
(Date)

TO BE COMPLETED BY TBCC FINANCE COMMITTEE      Date Received: \_\_\_\_\_

**Tuition Levels for 2008 – 2009 season for each child listed in section 2:**

| Child's Name | Tuition Amount |
|--------------|----------------|
| _____        | _____          |
| _____        | _____          |
| _____        | _____          |
| _____        | _____          |

\_\_\_\_\_  
(Signature of Finance Committee Member)

\_\_\_\_\_  
(Date)