

Monroe Street Fine Arts Center
2526 Monroe St. * Madison, WI 53711 * 608.232.1510

Scholarship Tuition Assistance Application Form

Today's Date: _____

Applying for: Fall Spring Summer

Student's name: _____ **Age:** _____

New MSFAC student

Renewing MSFAC student

Private music (which instrument?) _____ Group music _____

Private art (which medium?) _____ Group art _____

Parent/guardian name (if applicant is a minor): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Household Income (before taxes)

Parent/Guardian #1: _____

Parent/Guardian #2: _____

Other sources of income: _____

Please list special circumstances your family is experiencing and/or specific requests that may aid in our decision making. Feel free to attach a letter if you need more space.

How much can your family contribute toward lessons? \$ _____

Brief statement of interest from student:

Please attach a letter of recommendation from your MSFAC teacher (if a renewing student) or from a teacher, minister, etc. (if a new student).

Thanks for your interest in the Monroe Street Fine Arts Center!

For Office Use Only

Instructor assignment _____ Approval date _____ Contact date _____