Partial scholarships for private lessons are available to CMS students up through high school graduating seniors.

Scholarship awards are made based on the following considerations:
- Information submitted on the scholarship application form.
- Current account standing with CMS.
- Availability of scholarship funds.
- Student commitment, attendance and progress in lessons (For returning students)

Applications are accepted during the first semester of the academic year.

Continuation of the award through the academic year is contingent upon:
- Regular attendance at lessons. More than two excused absences may result in the termination of assistance.
- Reasonable progress in lessons that reflects regular practice at home.
- Input from teacher evaluation at the end of first semester, assessing student commitment, attendance and progress in lessons.

Current awards are not automatically renewed each year. A new application must be submitted.

Scholarships are not available for summer lessons.
UNI COMMUNITY MUSIC SCHOOL
PRIVATE LESSON SCHOLARSHIP APPLICATION FORM 2017-2018

Name of Participant: _________________________________________________________

Contact Information: Phone__________________ E-Mail __________________________

Address:___________________________________________________________________

Name of Parent/Guardian 1:______________________________________________

Employer: ______________________ Position: __________________________

Name of Parent/Guardian 2: ______________________________________________

Employer: _______________________ Position: __________________________

Number of people in household (including applicant): ________________

Does the participant qualify for reduced price school lunches? ____________________

What is your annual household income? (Please circle one.)

Less than $24,999  $40,000 to $69,999  $100,000 or more

$25,000 to $39,999  $70,000 to $99,999

Please share any extenuating circumstances that would indicate a financial need for scholarship assistance.

______________________________________________________________________________

______________________________________________________________________________

All information received will be kept confidential.
Notification of scholarship awards will be by phone or e-mail.

I certify that the information provided on this form is current and accurate.

_________________________________________________ _______________________
Signature of Parent/Guardian      Date of Request

Return Scholarship Application to Russell Hall Office OR mail to:
UNI CMS    UNI School of Music    RSL 115    Cedar Falls, IA  50614-0246

(FOR OFFICE USE)
Amount of Scholarship Award: ________________________________________________

Amount of Applicant’s Responsibility: _________________________________________
(Totals above are based on lesson tuition for the academic year, August-May.)

Approved by:_____________________________ Date: ____________________