enriching lives through music

Mountain Top Music Center

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Tuition Assistance 2016-2017 Season

Mountain Top Music Center's tuition assistance program works on a sliding scale. We award different amounts of tuition assistance depending on household income. To determine whether you qualify for Mountain Top Music Center's tuition assistance program, find your family size on the left column of the table below, then find the income level appropriate to your household in the columns to the right. We ask you to consider your total gross income, taxable or not, in figuring your income level. Mountain Top sometimes awards tuition assistance to families who do not meet income limits when special circumstances are involved.

INCOME ELIGIBILITY LEVELS - Guideline

Family Size	Level I	Level II	Level III
1	$11,368	$15,157	$18,946
2	$15,280	$20,373	$25,466
3	$19,205	$25,607	$32,009
4	$23,118	$30,824	$38,530
5	$27,030	$36,040	$45,050
6	$30,956	$41,274	$51,593
7+	$34,868	$46,491	$58,114
Assistance level	58%	48%	38%

To apply for tuition assistance, complete all information on this form, attach ***either*** your 2015 IRS Form 1040, or copies of two recent consecutive pay stubs and mail it, with your registration, to Mountain Top Music Center, PO Box 1228, Conway, NH 03818.

You must reapply for tuition assistance each year.

STUDENT INFORMATION:

Student Name(s):_____

Student's Parent/Guardian:_____Phone:_____

Town where student resides: _____

Programs/lessons registered (ie: 30 min. private lessons): _____

Total tuition (calculate to the best of your ability): _____

Total tuition you can pay: _____

Total tuition assistance you are requesting: _____

FAMILY INCOME INFORMATION (Please provide latest available gross yearly income)**.**

Parent/Guardian or Adult Student	Parent/Guardian or Adult Student
_____	_____
Address	Address
_____	_____
Occupation	Occupation
_____	_____
Employer/Business	Employer/Business
_____	_____
Total income	Total income
_____	_____

Total household income_____

Number of people in household_____
Please describe below any special circumstances that create financial need. Use a separate page if necessary

_____

_____

_____

_____

_____
I certify that all of the above information is true, correct, and complete

_____	_____
Parent/Guardian/Adult Student	Parent/Guardian

Date:_____

For Office Use Only:

Date Received:_____

Tuition Assistance Awarded:_____

Date of Award Letter:_____