

**Canopy Studio, Inc. Financial Aid Application**  
 Application Deadline – **Sept 30** for the Late Fall 2019 Session

<b>Office Use Only</b>	
Application Rc'd	_____
Date	_____
<input type="checkbox"/> <input type="checkbox"/> Scholarship	
<input type="checkbox"/> <input type="checkbox"/> Sch & Work Trade	
<input type="checkbox"/> <input type="checkbox"/> Work Trade	

**I am applying for (please mark all that apply):**

Scholarship       Work Trade Program        For myself       For my child(ren)

Have you received any type of financial aid from Canopy in the past 2 years?        Yes        No

**You must attach proof of income (one month of paystubs or most recent tax return) to be considered for Financial Aid, UNLESS you have a referral from one of our partner agencies, listed below.**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ e-mail \_\_\_\_\_

**If you are applying for yourself:**

Are you a full time student?        Yes        No

Are you still a dependent on someone else's tax return?        Yes        No

If you are employed:

Full-time        Part-time

Hours/week \_\_\_\_\_

Income from work \_\_\_\_\_ per month  
**(include one month of pay stubs or most recent income tax return)**

Classes taken at Canopy \_\_\_\_\_

\_\_\_\_\_

Classes you wish to take for Late Fall 2019

\_\_\_\_\_

\_\_\_\_\_

**Senior Teachers applying for Work/Trade:**

Maximum number of hours you could work at Canopy per week during the Late Fall 2019 Session: \_\_\_\_\_

Special skills or talents you can share

**If you are applying for your child(ren):**

Do you have a referral from:

ABHS        ESP        Butterfly Dreams        GA Options

Does your child have an IEP/504?        Yes\*        No

**\*\*EVERYONE\*\* must include a copy of cover page**

How old is your child?      Age \_\_\_\_\_ Grade \_\_\_\_\_

Additional child      Age \_\_\_\_\_ Grade \_\_\_\_\_

Does your child have a disability?        Yes        No

Would this require additional assistance during a class?        Yes        No

I am applying for:  Camp       Class       Private Lessons

**(Scholarships for private lessons are only available for children with IEPs – students with 504s should request a class placement)**

Has your child taken classes at Canopy?        Yes        No

Which ones? \_\_\_\_\_

\_\_\_\_\_

Which class are you applying for?

<b>All Applicants:</b>		Household Size	100% FPL	150% FPL
	Is your income <b>at or below</b> 100% FPL (see chart)	1	\$12,140	\$18,210
	<input type="checkbox"/> <input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No	2	16,460	24,690
		3	20,780	31,170
	Is your income <b>between</b> 100% and 150% FPL	4	25,100	37,650
	<input type="checkbox"/> <input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> No	5	29,420	44,130
		6	33,740	50,610
		7	38,060	57,090
		8	42,380	63,570

**You must fill out this form completely.**

We cannot consider applications with missing information. Please return this form by **Sept 30** to Canopy Studio. We will notify you of our decision by **Oct 7**.

If you do receive financial aid, we will give you instructions for registering.

Thank you.