



## Scholarship Application 2018 - 2019

### Mail completed application and supporting documentation to:

Shine Children's Chorus, 3515 SE Washington St, Unit 1, Portland, OR 97214/ scholarships@shinechorus.org  
All information provided on this form is kept confidential. Scholarship award will not affect admission.

#### 1. Contact Information

Full Name of Student's Parent(s) or Guardian(s): \_\_\_\_\_

Full Name of Student(s): \_\_\_\_\_

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

Phone: \_\_\_\_\_ Household Size: \_\_\_\_\_

Group(s):

- Little Lights (ages 5-6)  Shine Jr. (7-9)  Shine Chorus (9-12)  Lighthouse (12-18)  True North (14-18)

#### 2. Public Assistance- please include documentation (statement, copy of OHP card, etc.)

I am currently receiving assistance from the following programs (*check all that apply*)

Temporary Assistance to Needy Families (TANF) - \$ \_\_\_\_\_

Supplemental Security Income (SSI) - \$ \_\_\_\_\_

Oregon Health Plan (OHP) for adults in the household

*If you checked any of the boxes above, you may stop here + submit this signed form with documentation*

I am currently receiving Food Stamps (SNAP-Supplemental Nutrition Assistance Program) - \$ \_\_\_\_\_

#### 3. Employment and Income- please include 3 more recent pay stubs or most recent tax return

Household income per month: \$ \_\_\_\_\_

Any other income (e.g. unemployment, retirement, child support, worker's compensation)

*\*This refers to amounts that your household currently receive:*

Source of Income (describe) \_\_\_\_\_ Amount \$ \_\_\_\_\_

Source of Income (describe) \_\_\_\_\_ Amount \$ \_\_\_\_\_

Source of Income (describe) \_\_\_\_\_ Amount \$ \_\_\_\_\_

#### 4. Money on Hand

Total available in cash: \$ \_\_\_\_\_ Total in checking account(s): \$ \_\_\_\_\_

Total in savings account(s): \$ \_\_\_\_\_ Other available funds: \$ \_\_\_\_\_

#### 5. Other information

Please provide any information that you would like Shine Chorus to consider in deciding your eligibility.

\_\_\_\_\_

\_\_\_\_\_

Date

Signature of Student's Parent(s) or Guardian(s)