FREDERICK SMYTH INSTITUTE OF MUSIC



(Tedenck Smyth)

SCHOLARSHIP FUND APPLICATION

Full Name:				
Home Address:	City:	State: Zip:		
Date of Birth: En	nail:	Phone Number:		
School Now Attending:		Class of:		
College You Plan to Attend:				
Have you been accepted:				
Tuition: \$	Ro	Room and Board: \$		
What is your major, as defined	by the School:			
Father's Name:	Occi	upation:		
Mother's Name:	Oc	cupation:		
Names and ages of brothers ar	nd sisters and schools attending:			
What is your primary musical in	nstrument?			
List your music background an	d your plans after you complete	your college education:		
List three music References: (N	ame, Address, and Phone Numb	er)		
1.)				
3.)				
,				
I understand that the scholarsh satisfactory to the Trustees. I ce	nip for each year is dependent upertify that all information given to	ch of four years to attend college (as indicated). pon achieving academic and music proficiency of the Trustees in this application and in my to the best of my knowledge and belief.		
Annlicant's Signature:				

You must submit your high school transcripts and a photo.

Scholarships are applied to tuition only.

FREDERICK SMYTH INSTITUTE OF MUSIC SCHOLARSHIP FUND APPLICATION FINANCIAL INFORMATION

1. Please list the income of all family members (living at home or otherwise dependent upon family income) in total for the current year (the next twelve months) from work and from other sources including investments and other outside income.

Occupa	Yearly Income	
Student:		<u> </u>
Your Father:		\$
Your Mother:		\$
Other Income:		\$
Total Family Incor	ne:	\$
2. Please list all anticipated fa	mily expenditures in total fo	or the current year (the next twelve month
Home Mortgage/	/Rent Payment	\$
Car Loan Payments		\$
Money Deposited in Savings		\$
Household Expenses		\$
Property Taxes		\$
State and Federal Income Taxes		\$
Medical Expenses		\$
Tuition (other than applicant)		\$
Insurance		\$
Other Expenditur	res (specify)	<u> </u>
	enditures:	\$

3. and reasonably expect to receive.

Name	Amount	Number of Years
	\$	
	\$	
	\$	

4. Please list all funds actually set aside and e	earmarked for your education.
College Savings Accounts Other	\$ \$
5. Please describe any other factor; that may	affect your ability and your family's ability to pay for your education.
, , , , , , , , , , , , , , , , , , , ,	true and if, during any period that scholarship aid is to be received ation, our circumstances change so that this information no longer otify you accordingly.
Applicant:	Dated:
Father:	Dated:
Mother	Dated:

Frederick Smyth Institute of Music | 116 South River Road Building E Bedford, NH 03110 | 603-623-3420 | www.smythtrust.com

Deadline, for submitting application: June 1st for Fall Semester.

Scholarships will be awarded in mid-luly, Any application submitted after June 1st will not be considered until the following year. Scholarships are not retroactive.