

Financial Assistance Request Form

To request financial assistance with band fees, please complete this form and return it to Mr. Velasco. All information provided on this form is confidential and will not be shared.

Student's Name: _____ **Grade:** _____ **Student ID (last 4)** _____

Student's Cell Phone: _____ **Student's Email:** _____

Mailing Address: _____ **Apt.:** _____

City: _____ **State:** _____ **Zip Code:** _____

Name (s) of Parent's/Guardian's

1. _____ **Cell Phone:** _____ **Work:** _____

Email Address: _____

2. _____ **Cell Phone:** _____ **Work:** _____

Email Address: _____

Please give complete and honest information. The La Cueva Band Boosters will do their best to accommodate your family situation. Please request only what is necessary, as we rely on student fees to provide transportation, meals, music, instructors, facilities, etc.

Extended Payment Plans should be the first choice. Half Grants allow for more families to be helped. Full Grants should only be requested in case of extreme hardship. You must re-apply each school year to request assistance.

Aid Requested:

_____ **Extended Payment**

_____ **Half Grant**

_____ **Full Grant**

Requested Assistance with Which of the Following:

_____ **Band Registration Fee**

_____ **Color Guard Fee**

_____ **Winter Guard Fee**

Please provide information for consideration of granting financial assistance:

Parent Signature: _____

Date: _____

Approved: _____

Date: _____

Band Director's Signature

Acknowledged: _____

Date: _____

Band Board Member

It is requested that the family participate in the individual fundraisers, if possible. Financial aid will be considered only for students in good standing in the band program and may be withdrawn if the student does not fulfill their band commitments or participate in fundraising.