



Application Form

- Please fill out one application per student.
- Incomplete applications will not be processed.
- All applications are confidential. We may share the applicants contact information with the specified instructor.

Applicant Information

Applicant Name:		
Birth Date: (M/D/Y)	Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:	City:	Postal Code:
Have you received School of Music Funding Previously? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, which year? _____		
Parent/Guardian's Name:		
Phone: (Main)	Phone: (Secondary)	Email Address:
Household Income: \$ _____ + \$ _____ = \$ _____ Current Combined gross annual income of household + Child support received yearly from others = Total		
Number of Adults in the home:		Number of Children in the home:
Number of Children in daycare/childcare:		
If your household income is more than \$40,000, or your household income has changed significantly this year, please provide further detail s on your financial situation. (Feel free to attach a letter if you would like more space)		
Please attach a copy of your most recent Canada Revenue Agency Notice of Assessment (NOA) OR complete the Endorsement section below. If your family has farm income, please attach your most recent T2042 Statement of Farming Activities instead of a Notice of Assessment.		

I am a Saskatchewan Resident and have a Saskatchewan Health Card

Signature: _____ Date: _____

(Parents/Guardians must sign for applicants 16 or under)

Endorser Signature

An endorser is someone familiar with your family who can confirm a family's financial situation who isn't related. Please choose one of the following as your family;s endorser:

- Teacher/Principal/Community School Worker/Dream Broker Religious Faith Leader
 Social Worker/Counselor/Family Services Worker/Settlement Worker First Nations Elder

Name:	Occupation/Employer:	
Mailing Address:	City:	Postal Code:
Phone:	Email Address:	
<input type="checkbox"/> I am not related to the applicant.	<input type="checkbox"/> I am not related to the service provider.	
DECLARATION: I verify the income listed on this application and that the family is experiencing financial barriers that would prevent them from participating in this activity. I recommend this applicant be supported by School of Music.		
Endorser Signature: _____		Date: _____



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Activity Information

Name of Program(s):	
Teacher's Name:	
Start Date: (M/D/Y)	End Date: (M/D/Y)
Activity Contact Person:	Phone:
Mailing Address:	
City:	Postal Code:
Contact Person's Email Address:	

Send Your Application In:

- Email to musicschool@rosewoodpark.ca
- In person or by mail to the Rosewood Office

1300 N Courtney Street
Regina SK,
S4Y 0C5

- Speak with The Music Director before applying to confirm the classes and schedules.
Email: musicschool@rosewoodpark.ca

Activity Cost

If you are applying for more than one class (ie. Piano, Flute and group lessons) list each class and cost.

- I have not paid any of the fees for this program yet. OR
- I have paid some costs already and am only applying for the fees that will be due after the application deadline date.
Only upcoming costs are listed below.

Activity Break Down	Cost
Registration Fees	\$
Name of Class:	\$
Name of Class:	\$
Name of Class:	\$
Name of Class:	\$
Other Fees: (ie. Instrument rentals, exams, music books, and other supplies) Please list cost of each.	\$
Fees to be paid to another business: (ie. Rentals of instruments) Item/Where Purchased:	\$
Total Activity Cost	\$
Amount Requested from School of Music (Max of \$750)	\$
If the lessons will cost more than you are requesting, how will the rest of the cost be paid? (ie. Grandparents, savings... etc.)	\$