



Classics Abroad

2008 Paris Piano Program July 31 through August 15

FINANCIAL EVALUATION FORM

Submit by mail or fax by April 15, 2008

Financial Aid available *only* to Paris Piano Program applicants

Return to:
Classics Abroad Inc.
41 Madison Avenue, Suite 4000
New York, NY 10010
T 212.537.6105 / F 866.680.4334

Name (Last, First)	Date of Birth (M/D/Y)
1. 2007 Gross Income: \$	Nature of Job:
2. Financial resources available for summer 2008:	
• Estimated cash available as of June 2008: \$	
• Assistance from family: \$	
• Other assistance for summer 2008 (scholarships, grants, loans, gifts, etc.): \$ (N.B. many colleges have travel grants for study abroad. At your request, we will certify your application to the program.)	
Will you pay Federal Income Tax for 2007? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Amount (estimate): \$	
Are you, or have you ever been the recipient of any financial aid (scholarship, grant, award, or prize) given by an educational institution? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If so, name title of award, period covered, source, and amount: \$	
Have you lived in your parents'/guardians' home for more than six consecutive weeks in the past year? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do your parents/guardians claim you as a dependent on their federal income tax return? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you received more than \$2,000 in assistance from your parents/guardians in the past year? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Father or Guardian	Nature of Business
Home Address, Phone, E-mail	Position Held
	Name of Employer
Mother or Guardian	Nature of Business
Home Address, Phone, E-mail	Position Held
	Name of Employer

APPLICANT'S SIGNATURE

I affirm that all the information is complete and accurate. I understand that incomplete applications will not be considered, and that all information furnished will be held in confidence.

Signature

Date