

## **Financial Aid Application**

- Guilford Art Center offers financial aid for adults and children enrolling in classes, based on need and interest.
- Applications must be returned no later than ten days before the beginning of the semester for which aid is requested.
- Financial aid may be limited to classes that do not otherwise have full enrollment.
- GAC generally offers partial scholarships—50%--to enable as many students as possible to participate in our programs.
- Prospective students should register for their class, including payment; if financial aid is awarded, students will be
  refunded the difference. If financial aid is not awarded and students elect not to take a class, full tuition can be
  refunded. Please notify us if you are unable to complete payment prior to receiving aid.
- All applicants must submit the first page of their last federal tax return for income verification. All information will be kept confidential.

Name of Recipient:					
For youth applicants, nam	e of parent/guard	ian and age	e/grade of appl	icant:	
Address:					
Phone: E-Mail Address:					
Are you a GAC member?	(Yes/No)	If so, che	eck one: Indivi	dual Family	
What semester and class					
Number of adults/childre					
Annual gross household income:Have you applied for a				I for aid before?	(Yes/No)
Member/nonmember tuit Amount of financial aid re					
I hereby certify that all of	the above informa	ation is corr	ect.		
Signature of applicant or guardian				Date	
For Guilford Art Cer	ter Office Use Only. Fi	inancial aid aw	varded		_

Please provide all the information requested. Return completed form to GAC by deadline date. Email to <a href="mailto:info@guilfordartcenter.org">info@guilfordartcenter.org</a> or mail to: GAC, 411 Church Street, Guilford, CT 06437.