

BYT Tuition Assistance Form

DATE _____

All information is kept confidential and used solely for determining scholarship need and eligibility. Receiving a scholarship does not affect the part your child receives.

There are limited number of scholarships(tuition assistance spots) that are available.

Student's Name _____ age _____

Student's Name _____ age _____

Student's Name _____ age _____

Mother's Name _____ Father's Name _____

Home Phone _____ Mother's/Father's Cell _____

Address _____

City _____ Zip _____ Email _____

children in house _____ Total # in house _____

Father's Monthly Income _____ Mother's Monthly Income _____

Monthly Income from Child Support/Foster Care(if Applicable) _____

If unemployed, list previous job _____ how long unemployed _____

LIST Skills _____

worker's comp/disability/unemployment \$ _____/mo

Do you receive assistance from the state of TX? _____

Does anyone in your household work in full-time ministry? _____

If so, describe _____

Please tell briefly why you are requesting tuition assistance and the amount you are requesting.

Has your child/children participated in a production with BYT before? _____

If so, When? _____

What are you hoping your child/children gain(s) from participating?

Monthly Tuition Amount you feel you can pay _____

Would you be willing to volunteer if we can find a position that would work for you? _____

Guardian 1 Signature _____ Guardian 2 Signature _____

OFFICE USE ONLY: Tuition Assistance Granted? _____ Amount _____