



Dear Parent(s) or Guardian(s),

Vermillion Children's Choir (VCC) is offering the option of financial aid, and the organization will carefully consider each request for assistance. It is the belief of the organization and its directors that all qualified children should enjoy every opportunity possible to participate in VCC, regardless of the child's race, religion, background or socio-economic standing.

Because VCC's annual budget is tuition driven/supported, it is expected that the child's parent(s)/guardian(s) pay tuition, to the best of her/his/their ability in a timely manner. Because the yearly budget is funded primarily by tuition, there will be a limited amount of scholarship monies available for the season.

Tuition reduction is awarded on a case-by-case scenario, using an Honor System, meaning VCC considers tuition reductions based upon the information you provide for us with or without supporting documentation. VCC makes award decisions based upon the honest representation of your need for assistance. All tuition reduction requests and confidential information received will be kept under lock and key, stored in a secure location. Only the VCC Directors, the Treasurer and the Requesting Party will have knowledge of the tuition reduction award.

For families requesting tuition assistance because of financial hardship or extreme need, please fill-out both sections 1 & 2 of the attached form and return the hard copy to VCC as soon as possible. Decisions will be made in a timely manner and solely based upon the information you provide to VCC.

There are two expectations for the scholarship award:

- 1.) Parent(s)/Guardian(s) are expected to make monthly payments of tuition remainders in a timely manner until all tuition due is paid in full, less the award amount.**
- 2.) Your child MUST participate in all scheduled concerts, tours and events sponsored by VCC.**

The importance of Expectation #1 has been discussed earlier in this letter.

Expectation #2 requires further explanation. Scholarship assistance is given to your child in order to facilitate her/his participation in VCC. If you do not bring your child to the rehearsals, or your child fails to attend a concert, she/he is not fully participating in the choir. The importance of every child participating cannot be underestimated. Choir is a "team" activity, and none of our choristers is a "bench warmer!"

Families will receive written notification from VCC regarding any tuition reduction upon receipt and processing of your written application. The tuition reduction award received will be good for the current season only. Application must be renewed for each season in which assistance is needed. If at any time your financial situation changes and you are able to make full tuition payments, please consider making payment-in-full so other children in need may receive financial assistance.

If you have any questions or concerns, please do not hesitate to contact me directly.

Sincerely,

A handwritten signature in black ink that reads "David Holdhusen". The signature is fluid and cursive, with a large initial "D".

Dr. David Holdhusen
Executive Director, Vermillion Children's Choir
david.holdhusen@usd.edu OR
vermillioncc@gmail.com





Application for Tuition Reduction

Section 1	
FAMILY INFORMATION	
Name of Child(ren)	
Child 1	
Child 2	
Child 3	
Parent/Guardian 1 Name	
Street Address	
City	
State	
Zip Code	
Phone	
e-mail	
Parent/Guardian 2 Name	
Street Address	
City	
State	
Zip Code	
Phone	
e-mail	

Section 2		
Financial Information		
Monthly Net Income		
Primary Source of Income		\$
Secondary Sources of Income		\$
Child support/Alimony (if applicable)		\$
Other sources of income, including but not limited to:		
Pension/Social Security/Retirement		\$
Disability Benefits		\$
Dependent Benefits		\$
Survivor Benefits/ Veterans Benefit		\$
Student Loans/Grants		\$
Foster Care Benefit		\$
Unemployment Benefit		\$
Other: Rental Income, Investment Income, etc.		
Total Monthly Net Income:		\$
Total number in household:		
Wage earners		
Dependents		
Special Considerations		
Briefly describe any special considerations for this application (e.g. medical/dental payments not covered by insurance, cases of extended unemployment, etc.) Attach an extra sheet, if necessary.		
To the best of my knowledge, the above information is true and accurate.		
Signature & Date:		