



**Roswell High School Band Boosters Association (RHSBBA)**  
**Financial Aid Application 2021-22**

All information is kept in the strictest of confidence. Please complete all requested information and return to the Booster President (do not turn this form in to a Band Director). You can submit this form through email to [president@roswellband.com](mailto:president@roswellband.com) or by placing it in a sealed envelope marked "Application" and mailing it to RHSBBA 885 Woodstock Rd. STE 430-144, Roswell, GA 30075.

<b>Student(s) Name</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Email</b>	
<b>Grade</b>	
<b>Applying for Marching, Classroom, WG or IDL?</b>	
<b>Mother/ Guardian Name</b>	
<b>Mother/ Guardian Phone</b>	
<b>Mother/ Guardian Email</b>	
<b>Mother/ Guardian Employment</b>	
<b>Full or Part time?</b>	
<b>Annual Income *</b>	
<b>Father/ Guardian Name</b>	
<b>Father/ Guardian Phone</b>	
<b>Father/ Guardian Email</b>	
<b>Father/ Guardian Employer</b>	
<b>Full or Part time?</b>	
<b>Annual Income *</b>	
<b>Number of People in Household</b>	

*\*Please include W-2,1099 or other employment paperwork necessary.*

**When evaluating Financial Aid to Band and Color Guard students the RHSBBA Executive Board will consider:**

- Need of financial assistance
- Active Participation in band activities
- Active Participation of parent/guardian in band volunteer and fundraising activities
- Availability of RHSBBA funds to support financial assistance requests

Specific hardship situation where additional information can be provided:

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### **Parent's/Guardian's Declaration**

*I declare that I have read this form/ has been read to me and I hereby confirm that the information given herein is true and to the best of my knowledge.*

Mother/ Guardian Signature

Date

Father/ Guardian Signature

Date

**Please Note:** The filling of an application for Financial Assistance, does not guarantee that a student will receive Financial Aid. Financial Aid is very limited, and its receipt is upon the availability of funds and the number of students that apply for Financial Assistance. You will be notified by mail / email of Financial Aid eligibility

\*\*\* For Committee Use Only\*\*\*

RHS Band Director \_\_\_\_\_

RHSBBA Executive Board Member \_\_\_\_\_

Approval Date \_\_\_\_\_

Notification Date \_\_\_\_\_