

**Serimus Operating Foundation**  
**Application For Student Financial Assistance**  
**2021 2022 School Year**

The Serimus Operating Foundation goal is to provide children with equal access to enrichment opportunities. Families are responsible for notifying us of changes in financial status when they occur, so that funding can be targeted to those with the greatest need. While our resources are limited, we will review each request and provide assistance whenever possible.

Financial assistance is based on financial need for residents of Larimer County and is offered as a benefit to our students on a limited basis. We reserve the right to discontinue funding as necessary. Funds will be paid directly to the instructor or program. Applicants' instructors will be notified of award by email or phone no later than one week after application is received. Please list siblings on the same form.

Please complete this confidential application and return by *fax or email* to:

The Serimus Operating Foundation  
Fax: 970-224-2760 [info@serimus.org](mailto:info@serimus.org)

Program Name: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

Student/s Name/s \_\_\_\_\_ Age/s: \_\_\_\_\_

Parent/s or Guardian/s Name/s: \_\_\_\_\_

Address: \_\_\_\_\_

Do you RENT:  OWN:  OTHER: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W): \_\_\_\_\_

Email Address: (Please print) \_\_\_\_\_

Annual Combined Gross Income \$ \_\_\_\_\_ (as reflected on your most recent U.S. Federal Income Tax Form)

Number of family members supported by this income: \_\_\_\_\_

To maintain the integrity of Financial Assistance you may be asked to submit a copy of your recently filed U.S. federal income tax return (Form 1040) as a condition of the final selection process. This tax return will be used for evaluation purposes only, and its contents will remain confidential. **If you are self-employed, a Schedule C or Schedule K-1 form must be submitted along with the first two pages of your 1040.**

If you are interested in sharing the cost of lessons, please state the amount you would like to pay per lesson: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

*We invite participants to "pass it on" by putting any \$ amount into the lesson fund should you ever be in a position to do so.*