

C O N C O R D  
C O M M U N I T Y  
M U S I C  
S C H O O L

**FINANCIAL AID INFORMATION**  
**Fall 2026-2027**

Application Deadlines

Your **completed** application must be submitted to CCMS by the following dates in order to be processed before the CCMS Financial Aid Committee Meetings. **Late applications will only be considered if funding is available after the fall financial aid meeting.**

	<u>Fall Semester</u>	<u>Spring Semester</u>
Returning Fin. Aid Students:	August 1, 2026	January 4, 2027 (Letter)
New Applicants:	August 1, 2026	Rolling Basis*

\* Financial Aid is awarded in the fall for the entire school year. Funds may be limited or unavailable for new applicants in the spring semester. Please contact the Director of Student Services for more information.

Process for Determining Awards

The Financial Aid Awards Committee reviews all applications. The Committee meets prior to the beginning of the fall semester. All discussions of the applications at the meeting are confidential.

Criteria for Determining Awards

1. Income level and family size: Please see income eligibility chart below for details.
2. Special circumstances: High musical expenses, sudden financial change (i.e. loss of job, emergency expenses, etc.), other circumstances as described.

CCMS Financial Aid Awards Income Eligibility and Assistance Levels

Families may be eligible for one of three assistance levels depending on family size, gross family income, and special circumstances that make a case for financial need. The following chart, based on Federal Poverty Guidelines as of January 2026, shows the maximum family income allowable for funding consideration at each level (please see page 2 for more detail). **Families whose income exceeds the Level III maximum but have special circumstances that make a case for financial need are encouraged to apply and include a letter explaining their circumstance; funding may be available.** The Financial Aid Committee will approve new guidelines at the annual fall meeting.

**MAXIMUM FAMILY INCOME as of January 2026**

<u>Family Size</u>	<u>Level I</u>	<u>Level II</u>	<u>Level III</u>
1	\$23,940	\$31,920	\$39,900
2	\$32,460	\$43,280	\$54,100
3	\$40,980	\$54,640	\$68,300
4	\$49,500	\$66,000	\$82,500
5	\$58,020	\$77,360	\$96,700
6	\$66,540	\$88,720	\$110,900
7	\$75,060	\$100,080	\$125,100
8+	\$83,580	\$111,440	\$139,300

Level I ( $\leq$  150% federal poverty level) applications will receive financial aid awards at the highest percentage of the tuition, with awards as a percentage of tuition decreasing through Level II ( $\leq$  200% federal poverty level) and Level III ( $\leq$  250% federal poverty level). Special circumstances (as explained by the applicant in the optional narrative attached to the Financial Aid Application) may cause the Financial Aid Awards Committee to move an application from a higher income level to a lower income level, resulting in an increased award, and may allow for families exceeding Level III income level to receive some assistance. Students who are listed as dependents on their parents' 1040 form may not apply for financial aid based on their own income.

### Recipient Obligations

1. Student co-payments must be made on time in order for financial aid to be continued.
2. For continuing students, evaluations of student effort, progress and attendance will be considered.
3. All student families receiving financial aid are required to complete a survey and write a letter of feedback describing your experience. These letters will remain anonymous.
4. For financial aid to be continued from the fall semester to the spring semester, a letter of intent is required by the spring semester due date.

By submitting an application, you are indicating your agreement to the above obligations.

### Application Process

**REQUIRED:** Completed CCMS Financial Aid Application. **INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

**REQUIRED:** Proof of total family income: Most recently filed federal income tax form (1040, 1040A, 1040EZ). If you do not file a federal income tax form, please submit copies of other verification of income and/or support. **Proof of income must support total yearly family income figure entered on application.**

**REQUIRED:** If applicable, a separate page of narrative explaining any special circumstances.

Please refer any questions about financial aid and the application process to Nicole Laurin, Director of Student Services at (603) 228-1196 ext. 103 or [nlaurin@ccmusicsschool.org](mailto:nlaurin@ccmusicsschool.org).

*The Concord Community Music School does not discriminate on the basis of gender, race, religion, sexual orientation, national or ethnic origin, marital status, or age in employment or administration of its educational policies, scholarship and financial aid programs, or other school administered programs or activities.*

# APPLICATION FOR FINANCIAL AID

**Only completed financial aid applications will be considered.** Complete a separate form for each member of the family. If you have questions about completing the application, please contact Nicole Laurin, Director of Student Services, at [nlaurin@ccmusicsschool.org](mailto:nlaurin@ccmusicsschool.org) or (603) 228-1196, ext. 103. All information provided is confidential.

## SECTION I. STUDENT INFORMATION

Student Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Preferred Phone: \_\_\_\_\_

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

Adult, or Date of Birth: \_\_\_\_\_ School (26-27): \_\_\_\_\_ Grade: \_\_\_\_\_

Individual Instruction:

Instructor: \_\_\_\_\_

Lesson Length:  30 minutes

45 minutes

60 minutes

Instrument: \_\_\_\_\_

Ensemble (if applicable) \_\_\_\_\_

Estimated total tuition for semester: \$ \_\_\_\_\_

Amount of Financial Aid you are requesting: \$ \_\_\_\_\_

## SECTION II. FAMILY INCOME INFORMATION (provide latest available gross yearly income figures)

**Parent/Guardian #1 OR Adult Student:**

**Parent/Guardian #2 OR Spouse/Partner**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

(if different from above)

(if different from above)

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Annual Income \_\_\_\_\_

Annual Income \_\_\_\_\_

PROOF OF INCOME

Do you file federal tax forms 1040, 1040A, or 1040EZ?  Yes  No (if no, go to Other Income)

Adjusted Gross Income from 2025 federal income tax form: \$ \_\_\_\_\_

Attach copy of most recently filed federal income tax form.

Other income (please attach proof): list sources and amounts, i.e. rental income, dividends and interest, alimony, child support, social security, unemployment, insurance, inheritance, support, federal or state aid, etc.

<b>Description of Income</b>	<b>Amount of Income:</b>
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total annual income: \$ \_\_\_\_\_

Number of people supported with this income: Adults \_\_\_\_\_ Dependents \_\_\_\_\_

The figure shown on proof of income must support total yearly family income entered on this application. **Your application will not be processed without proof of income.**

**SPECIAL CIRCUMSTANCES**

A separate page may be attached to describe any unusual expenses that might help determine financial need. Special circumstances may include emergency expenses, loss of job, significant income change since the latest tax return, or additional musical expenses not included above.

I certify that the information provided is accurate, correct and complete. I agree to the policies and obligations set forth in the Financial Aid Information sheet. I have read the Music School policies located on the website and agree to the Music School's terms.

\_\_\_\_\_  
Name of person completing application

\_\_\_\_\_  
Relationship to applicant (if applicable)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date