## **Texarkana Youth Symphony Orchestra** SCHOLARSHIP REQUEST FORM

Students may qualify for a tuition scholarship based on financial need. If you qualify for free or reduced lunch at your regular school and would like to be considered for a scholarship, please complete the form below, have your school's officer (principal, assistant principal, or person in charge of the free/reduced lunch program) sign it. Return completed form to TSO, 421 Hickory Street, Texarkana, AR 71854.

Student Name		
Home address:		
City:		State:
Zip:	Home Phone #: (	)
Parent or guardian complete th	e next section:	
	rmation required to veri	_(fill in name of school attended here) fy my child's participation in the above am.
Signed:(Chi	ild's parent or guardian)	
Print parent name:(Print	nt name here)	
Date:		
" I verify that the above-na under the Title I program at		to receive free or reduced lunch
School Official's Signature:		
Print Name:		
Title:	Date	