

Portland Stage Company Financial Assistance Form for In-Theater Programs

Application Date _____

I

Name of Dependent Child that would benefit from this assistance: _____

Applicant's Name _____ Home Phone _____

Address _____ Work Phone _____

City _____ State _____ Zip _____

Email _____ Alternate Email _____

Applicant's Employer _____ Supervisor _____

Employer's Address _____ Employer's Phone _____

Spouse's Name _____ Home Phone _____

Address (if different) _____

Employer _____ Supervisor _____

Employer's Address _____ Employer's Phone _____

Dependent Children Living in Household: Other Persons Living in Household:

Name DOB Name Age Relation

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

The program for which you are requesting assistance
(Summer Camps, Vacation Camps, Play Me a Story, Classes, etc.)

II

If you are on Public assistance please check the appropriate item and submit a copy of your card or other verification:

____ AFDC ____ EAEDC ____ Veteran's Benefits ____ Food Stamps ____ Other

III

Monthly Household Income (designate type of income and amount received each month)

Type

Wages (before taxes, ect taken out) \$ _____

SSI \$ _____

AFDC \$ _____

Unemployment \$ _____

Disability \$ _____

Child Support Income \$ _____

Total Monthly Income \$ _____

Please attach documentation from any source of income you are receiving (as marked above). All household members who are working are asked to submit a copy of check stubs from the last three weeks.

IV

Total current value of any accounts (investment, checking, and retirement): \$ _____

Are there other people, other than the parents, who are able to contribute to the child attending? Yes _____ No _____

If so, how much are they able to contribute? \$ _____

What do you feel you could contribute, if any, to the cost? _____

V

Have you received financial assistance in the past from Portland Stage Company? Yes _____ No _____

If yes, For what program and when and how much? _____

VI

If financial aid were not available, would you be interested in work study?

Yes _____ No _____

VIII

The statements and responses I have given are true and correct.

Applicant's signature: _____

Please return this form and necessary verification to:

Hannah Cordes, Education Director

Portland Stage Company

P.O. Box 1458, Portland, ME 04104