

The Norma G. Canner Foundation for Voice Movement Therapy

Application for the Voice Movement Therapy Foundation Training:

Singing the Psyche

SCHOLARSHIP APPLICATION FORM

This form must be sent by email in an attachment to lerina@thevoicebox.co.za

**The Norma G. Canner Foundation for Voice Movement Therapy, Inc. (NGCF)
501c(3), EIN# 73-3131087, FID# 74-3131087.**

The NGCF is a not-for-profit organization which promotes the work of VMT through an extensive training program in the form of four 3-week seminars, and also through classes and concert-demonstrations. The Training is open to any individual - inclusive of race, religion, sexual orientation or gender identification, or other life issues, who has a strong commitment to train in this work and who is physically and emotionally ready to undergo an intense and demanding program. Scholarship assistance is provided based on financial need and is allocated towards tuition.

PERSONAL INFORMATION

Your Name (First, Last, and Suffix if desired)

Your Address (House or Apartment #, Street#)

City

State or Province

Zip/Postal Code/Country

Cell Phone and/or Landline

Email Address

FINANCIAL INFORMATION *(ADDITIONAL DOCUMENTATION NEEDED)*

Please include a copy of your most recently submitted tax return or tax transcript from the IRS (or equivalent in your country). Please black out the social security or other such identifying personal number on the document before sending.

Name of Employer/Company _____

Your Annual Income _____

Spouse/Partner/Other Family Member who shares expenses or otherwise provides financial support to you. Include their relationship to you:

Their Home Address if not the same as applicant's address (House or Apartment #, Street #):

City State or Province Zip/Postal Code/Country

Cellphone and/or Landline Email Address

Employer Their Annual Income

HOUSEHOLD INFORMATION (*DEPENDENTS LIVING WITH YOU*)

Name of Child Age School Attending Tuition, if any

Name of Child Age School Attending Tuition, if any

Name of Child Age School Attending Tuition, if any

Additional or Other _____

Do you own your home?

Yes ___ No ___ If yes, current market value _____ Equity _____

Do you rent your home?

Yes ___ No ___

If yes, what is the monthly rental cost? _____

Do you own other real estate?

Yes ___ No ___

If yes, list each property, its current market value, and its equity. If you have investment property, please indicate the yearly income that it generates. _____

VEHICLE INFORMATION

Vehicle #1: Make _____ Model _____ Year _____

Vehicle #2: Make _____ Model _____ Year _____

OTHER FINANCIAL ASSETS, such as stocks, bonds, savings accounts, CDs, money market funds, trusts, second homes, boats, motor homes, etc. Please list the total net value for each at the time of submission of this application. _____

SPECIAL CIRCUMSTANCES: Below, or on a separate sheet, please detail any extraordinary circumstances, such as medical expenses, outstanding loans, recent layoffs or job irregularity due to profession, etc., which we should know as we review the details of your application.

CONFIRMATION

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein immediately.*

Signature _____

SCHOLARSHIP APPLICATION PROGRAM

Please consider carefully your need for financial assistance and the amount of your scholarship request; we are a small foundation, and our funds are limited. Decisions regarding financial assistance are made at the sole discretion of NGCF and those decisions are final.

SCHOLARSHIP APPLICATION CHECKLIST

- 1. A signed and completed application as indicated;
- 2. A signed and completed scholarship form, including all requested information;
- 3. Include this Scholarship Application with your General Application and the non-refundable \$25 USD fee (there is no additional fee for the Scholarship Application).

PLEASE NOTE: Your information is personal and confidential and will be treated as such. Please send scholarship requests in an email attachment (NOT in the body of the text), as the financial information in this application is nobody's business but yours and ours.

To process payment of the application fee via PayPal, [please click here](#).

Send all applications by email to: lerina@thevoicebox.co.za