

2018 SUMMER MUSIC STUDY SCHOLARSHIP APPLICATION

For Sophomores, Juniors and Seniors, 2018-19 School Year

Completed applications due May 1, 2018

Name: _____ Grade: _____

Address: _____ Phone: _____

Instruments: _____ Years Studied: _____

List number of **band and orchestra service hours** you have accrued and tasks you have performed during the current school year, a minimum of 4 hours is required.

Activity: _____ Hours: _____

Activity: _____ Hours: _____

Activity: _____ Hours: _____

Activity: _____ Hours: _____

Activity: _____ Hours: _____

Director Initials: _____ Total Hours: _____

Indicate all curricular and extra-curricular ensembles in which you currently perform:

Concert Band <input type="checkbox"/>	Full Orchestra <input type="checkbox"/>
Symphony Band <input type="checkbox"/>	Pit Orchestra <input type="checkbox"/>
Pep Band <input type="checkbox"/>	Chamber Ensemble <input type="checkbox"/>
Jazz Band <input type="checkbox"/>	Other: _____

MSBOA participation (List all performances – solo, ensembles)

Solo/Group: _____ District Rating: _____ State Rating: _____

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Solo/Group: _____ District Rating: _____ State Rating: _____

Name:

Summer Music Study Scholarship award will be used for:

_____ **Music Camp, Workshop, Institute:**

(Attach copy of acceptance letter and payment receipt).

Program/Contact Person: Address:

Telephone:

Dates of Attendance:

Total Cost:

Have you received any other scholarships for this activity? _____(Yes/No)

If yes, list amount \$_____

_____ **Private Instruction Instructor:**

Telephone:

Cost per lesson:

Number of lessons scheduled over summer months:

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

**RETURN THIS FORM IN A SEALED ENVELOPE NO LATER THAN MONDAY, MAY 1,
2018:**

To: Summer Scholarship Committee

From: (your name)

c/o Mr. Cleveland or Mr. Zogas