

34th Annual MUSIC SCHOLARSHIP APPLICATION

*Applications **MUST** be postmarked by February 9, 2019*

Fill in **ALL** blank spaces!

Please print!

DATE _____

Applicant's Name	Home Phone	Street Address
	Cell Phone	
Town/City	ZIP	
High School	H.S. Phone	
H.S. Address	ZIP	Expected
Graduation Date	College Planning to Attend	
Voice or Instrument	College Major	
H.S. Music Teacher (name) _____ (signature) _____ Address _____	Home Phone or Cell _____	
Private Music Teacher (name) _____ (signature) _____	Home Phone or Cell _____	
Accompanist's Name _____	Home Phone or Cell _____	
Music Background _____	<u>PLEASE USE SEPARATE SHEET</u>	
School Music Activities _____	<u>FOR DETAILS COVERING</u>	
Community Music Activities _____	<u>THESE SUBJECTS</u>	

List below two (2) compositions of contrasting style to be performed at auditions.

Composition _____	Composer _____	Performance Time _____
Composition _____	Composer _____	Performance Time _____

We have read, understand and agree to abide by the requirements for this award.

Applicant's Signature _____
Parent's Signature _____

Please send photo with your application. It will be returned if requested.

Return applications to:

**Sharron Rich
63 Tristan Lane
Williamsville, NY 14221**

**Ph: 716-634 2581
cell: 716-634 6884**

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