

Arlington Music Enrichment Program

2018-2019

Scholarship Application

(To be completed by student and parent and returned to the program director)

Student Name _____

Parent Name _____

Address _____ Zip Code _____

Home Phone _____ Daytime Phone _____

Please describe briefly why you need assistance in paying for lessons (i.e. what financial circumstances...).

I am applying for a music scholarship for the following reason(s) _____

Please describe briefly why you wish to study music.

I want to study music privately because _____

I understand that being awarded a music scholarship is a privilege. I will do my best to earn that privilege by being a responsible ensemble member. I commit to do the following things: I will practice, attend all performances, be present for all rehearsals beyond the school hours, remain academically eligible, and participate in all fundraising activities. I realize that my failure to adhere to this commitment may result in the withdrawal of this scholarship.

Student Signature _____ Date _____

I understand that a music lesson scholarship is a privilege. I will see that my child takes full advantage of this opportunity. I realize that the money to provide scholarships is derived from the fundraising efforts of the Lamar Choir Booster Club. I recognize that one factor in the allocation of scholarship awards is the student's commitment to the program. I have read the student agreement above and will help my child fulfill that commitment. I will also support the Lamar Choir Program in its activities. I understand you will send me a list of volunteer opportunities in which I may participate.

Parent Signature _____ Date _____

(For campus program use only)

Instructor _____

Awarded \$ _____ per lesson.