

**NEWARK ARTS COUNCIL MUSIC SCHOLARSHIP
APPLICATION FORM**

NAME _____ PHONE # _____

ADDRESS _____ CITY _____ ZIP _____

HIGH SCHOOL _____ GRADE _____

PLEASE LIST MUSIC CLASSES TAKEN - OR NAME and ADDRESS OF YOUR
PRIVATE MUSIC TEACHER: _____

Name of 2 or 4 year college you plan to attend _____
Intended major _____ GPA _____

List honors, achievements, awards you have received related to music:

LIST YOUR PUBLIC and/or SCHOOL PERFORMANCES/RECITALS: _____

PLEASE GIVE A SHORT DESCRIPTION OF YOUR TWO 3- 5 MINUTE
PRESENTATIONS TO BE GIVEN AT THE AUDITION - DATE WILL BE MAY 5, 2007
AT 10 am at the MAC GREGOR/BRIDGEPOINT SCHOOL AUDITORIUM, 35753
CEDAR BLVD., NEWARK and WILL BE CONFIRMED BY MAIL:

PLEASE INCLUDE A RECOMMENDATION FROM A PRIVATE OR SCHOOL MUSIC
INSTRUCTOR.

DATE _____ SIGNED _____