

**TAMPA CHAPTER  
AMERICAN GUILD OF ORGANISTS**

**MARGARET SMITH McALISTER SCHOLARSHIP APPLICATION FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Number of years of piano study: \_\_\_\_\_ Current Teacher: \_\_\_\_\_

Teacher's telephone number: \_\_\_\_\_

Briefly explain why you are interested in studying the organ (use the other side if you need more room):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your musical experience so far, other than piano lessons (other instruments played, choral groups, camps, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where will you practice the organ, and how many hours a week will you be willing to practice?

\_\_\_\_\_

\_\_\_\_\_

*Please return this form, along with a letter of recommendation from your teacher or other person familiar with your musical background and abilities, to the address at the top. Forms may also be scanned and emailed to [vbhoward@gmail.com](mailto:vbhoward@gmail.com). An email address must be included for acknowledgement.*