



## Young Artists' Scholarship Competition Application Form

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Email address \_\_\_\_\_

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Name of private teacher \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

Name of school music teacher (optional): \_\_\_\_\_

Phone: \_\_\_\_\_ email: \_\_\_\_\_

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Selected audition piece:

Title \_\_\_\_\_ Movement \_\_\_\_\_

Composer \_\_\_\_\_

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List musical accomplishments and honors (attach separate sheet if needed):

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Signature of current music teacher \_\_\_\_\_ Date \_\_\_\_\_

Student signature \_\_\_\_\_ Date \_\_\_\_\_

I understand that each student will be evaluated fairly, and I agree to abide by the decisions of the judges.  
Students chosen as semi-finalists or finalists must be available to appear on the contest dates listed above.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_