

## **General Scholarship Cover Page**

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Name	ed to the recipient upon submission of proof of continued education.
Address	
City, State Zip	
Phone Number	
Email	
	replete, with all attachments, and submitted in a 9x12 envelope, by the bunseling department. Late or incomplete applications will not be
FOM Only	
Date Submitted:	Application number:

This page should be managed by the Music Director or a member of the Friends of Music not affiliated with the Selection Committee, who does not have a graduating student, and kept confidential from the committee to eliminate any potential biases. Additionally, all identifying details must be removed from the submitted documentation.



## General Scholarship

Alvirne High School Friends of Music awards annual, nonrenewable scholarships to Alvirne seniors who are active members of the Alvirne choral/instrumental music program. A minimum of three years of active participation is required as well as an acceptance into a college, university, adult education program, or any other program evidencing an intent to further education. Interested candidates will be attending at least one course in the same calendar year the scholarship is awarded.

Our goal is to award scholarships to qualified participants. The amount will be determined by available funds. The scholarship will be awarded based on:

- Music Program Involvement and Commitment
- Music Leadership
- Music Community Service
- Academics

Checklist for ap	oplication:
Cov	er Page
This	s Page
Acti	vities Form
Lett	er to the selection committee
One	letter of recommendation from Alvirne Counseling Department, teaching faculty
(exc	cluding music directors), or personal contact.
A co	ppy of your Transcript with current GPA (minimum GPA of 2.5)
☐ Higl	a School attendance record (music director will request from guidance)
☐ Cop	y of the acceptance letter or its equivalent from a college, university, adult
edu	cation, or similar program.

FOM Only		
Date Submitted:	Application number:	



Date Submitted:

## **General Scholarship Activities Form**

Please complete all required information:

the follo	wing years:
	furthering my education through(college/university/adult education course, etc.)  mmer/Fall of  (year)
you shou	the Selection Committee: Attach a letter telling the selection committee why ald be considered for this scholarship (excluding financial needs) and reference to use yourself in ten years. All letters must be typed, double-spaced and no more pages.
program related a	wards: Attach a list of any musical awards, since entering the high school, you have earned and the years they were awarded. You may include school wards (e.g., All-State, Jazz All-State Participant, etc.) and outside of school Senior awards to be awarded in late May will have no effect on this application.
events/ac indicate Example down, pa positions	rogram Involvement and Commitment: Attach a list all music related ctivities (not graded), demonstrating how you went above and beyond. Please the grade levels you participated and any leadership position, if applicable. It is could include, but are not limited to volunteering for concert set up and tear articipating in various fundraisers sponsored by FOM, leadership camps and/or is held, taking private lessons, auditioning for Jazz or Classical All-State, ting in a community band or choral group, etc.
FOM Only	

Application number: