

MMEA-WD Music Education Scholarship application

Name _____ E-mail address _____

Address _____ Phone number _____

City _____ State _____ Zip Code _____

What college/institution do you plan to attend? _____

Have you already been accepted? _____ Is your deposit paid? _____

Grade Point Average _____ AND/OR Rank in Class _____

Mother's occupation _____

Father's occupation _____

Number of siblings and their ages _____

Participation in District, MMEA All-State, and MENC Eastern Division Concerts:

Please fill in the year next to each grade, then write in the instrument/voice part and ensemble performed in for each concert.

	District	MMEA All-State	MENC Eastern Division
9 th Grade Year _____			
10 th Grade Year _____			
11 th Grade Year _____			
12 th Grade Year _____			

The information set forth above is true and complete to the best of my knowledge.

Student's signature _____

Parent's signature _____

Please continue application on next page

MMEA-WD Scholarship applicant information, page 2

Name of your high school _____

School address _____

City _____ State _____ Zip Code _____

Music Department Sponsor:

Name (print) _____

Signature _____

Guidance Department/Counselor:

Name (print) _____

Signature _____

School Principal/Headmaster:

Name (print) _____

Signature _____