

SIERRA MUSIC SCHOLARSHIP APPLICATION

PERSONAL INFORMATION:

Date: _____

First Name _____ Middle Initial _____ Last Name _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____

Birth Date: _____ Age: _____ Female Male

School: _____

Music Teacher: _____

Instrument or voice: _____ No. of years: _____

List musical organizations to which you have belonged in school

List special activities in which you have participated and the honors you have won as a music student.

Describe musical experience and training you have had.

Provide an autobiographical sketch; short and long range educational/occupational career goals and aspirations and your plans for achieving them. Use reverse side of this page if necessary.
(To be filled out by student, not parent)

Signature of Applicant : _____ Date: _____

Send to Sierra Music Scholarship Committee, St. James Concert Series,
P.O. Box 1145, Sonora, CA 95370