

MUSIC SCHOLARSHIP APPLICATION FORM

FULL NAME						
(Please print)	First	MI		Last		
ADDRESS						
	Number		Street		(Apt. No.)	
	City			State	Zip	
TELEPHONE			_E-MAIL			
		SOPRANO 🗆	ALTO 🗆		BASS 🗆	
Please briefly list all	choral ensembles or p	performing arts groups	/teams you p	articipate in:		
NAME OF SCHOOL	YOU ATTEND					
MUSIC TEACHER/F	RIVATE VOICE TEA	CHER				
				<i>.</i> .		
Please list any of you	ur musical or performi	ng arts highlights that	you would like	e to share:		
Nature of Performance		Location	Location		Date	
sure to include a brie		u plan to utilize the fur	nds. In signin	g this application	S Music Scholarship. Be you agree to the terms and	
					LTCS USE ONLY Application Written Essay	
Signature			DATE		Live Audition Letters of Reference	
	Appl	ication materials sl	hould be ma	iled to:		
		Little Traverse C P.O. Box		У		

P.O. Box 2417 Petoskey, MI 49770