



STANISLAUS
COUNTY BRANCH

Music Teachers' Association of California Stanislaus County Branch Memorial Scholarship Application

*Please see the Branch Handbook for all rules and deadlines for the Memorial Scholarship.
Remember to include the letters of recommendation and audition fee. Please print or type.*

Full Name		Age
Street Address	City	Zip
Email address	Phone ()	-
Auditioning instrument (or voice type)		

Primary Music Education (list your private musical instruction)

<i>Name of Teacher</i>	<i>Instrument</i>	<i>Dates of Study</i>

Additional Musical Experience (school ensembles, musical theater, masterclasses, festivals and other honors)

<i>Name of Organization</i>	<i>Director/teacher</i>	<i>Date(s)</i>	<i>Instrument</i>

Audition Repertoire (must meet regulations as specified in handbook)

<i>Composer</i>	<i>Title</i>

What are your future goals for music?

Name of College you plan to attend, or Master Teacher you plan to study with:

Student Signature: _____ date: _____