

**SYCAMORE MUSIC BOOSTER  
2024 SENIOR MUSIC SCHOLARSHIP APPLICATION**

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The Senior Music Scholarship awarded by the Sycamore Music Boosters is for the SHS graduating seniors who will be majoring in music in college. If we have no music majors, this scholarship will be made available to seniors who will minor in music or have participated and had a presence in one or more of our music programs: orchestra, band, or choir, and may be thinking of participating in music in college. The Senior Music Scholarship of \$1000 per scholarship will be awarded to up to three graduating seniors, one in each of the three divisions: vocal, strings, and band, depending on the availability of funds. If a division does not submit an applicant, then that scholarship will go to the next deserving applicant from either of the other divisions. This is a competitive scholarship and the scholarship recipient or recipients will be determined based on the overall quality of the applications submitted. In addition to completing the following information, applicants must provide a copy of their high school transcript with the application, an official signed letter from the college/university indicating the student has been accepted into a music degree program (if you are a music major), and 2 recommendations from music educators using our form. **INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED.** Award recipients will be announced at the Senior Awards Night in May. The scholarship check will be made out to the school the student will attend.

Please complete the following section (print neatly or type):

1. Name of Applicant: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Telephone: \_\_\_\_\_
4. Email: \_\_\_\_\_
5. Parent/Guardian(s): \_\_\_\_\_
6. Name and location of College/University you will be attending:  
\_\_\_\_\_
7. What is your intended major? (music performance? Education?)  
\_\_\_\_\_
8. What instrument(s) do you play? \_\_\_\_\_
9. What vocal part do you sing? \_\_\_\_\_

**10. Have you or any of your family members volunteered in any Music Boosters fundraising events? If so, list how you participated.** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Please TYPE your responses to the following on separate sheets of paper:**

- **Two recommendations from music educators (e.g. private lessons) are required. Please use the forms provided with this application. If you have taken private lessons, please indicate how many years and the name of the instructor**
- **List your school music activities – what and when you participated.**
- **List your non-school activities – what and when you participated.**
- **List your music awards and honors.**
- **If you are a music major please enclose a copy of your School of Music acceptance letter - or an official letter from the college/university you will be attending that states you will be a music major. If you are a music theater major, the major must be within the department/school of music with the major course work in music curriculum.**
- **Write a brief statement about what you have learned from music. In addition, discuss the reasons why you are majoring in music in college.**
- **With your application packet, please provide a signed cover letter demonstrating your interest in the scholarship.**
- **Please provide a copy of your high school transcript.**

**APPLICATION DEADLINE: April 12, 2024 (Application packets must be received by that date. Late or incomplete applications will not be accepted.)**

**RETURN APPLICATIONS TO:**

**Sycamore Music Boosters  
Scholarship Chair  
aaska0612@gmail.com**

# SYCAMORE MUSIC BOOSTER

## SENIOR MUSIC SCHOLARSHIP RECOMMENDATION

**Applicant:** Please complete only the top section of the form.

Today's Date \_\_\_\_\_

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone: \_\_\_\_\_

Primary Instrument: \_\_\_\_\_

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**Music Educator:** Please complete this form and return it directly to Shelly Bychowski as soon as possible. The student's application will **not** be considered until this form has been received.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

School/Employer: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

How long have you known the Applicant? \_\_\_\_\_

**Please rank the applicant's musical abilities on a scale of 1 to 5. Please use these guidelines when rating your student:**

- 1 - Equals an average high school player.
- 3 - Equals a student who is an all district player and a good section leader.
- 5 - Equals a mature undergraduate college student.

<b>A.</b>	Overall musical talent	_____
	Tone quality	_____
	Rhythm	_____
	Intonation	_____
	Technique	_____
	Dynamic Control	_____
	Style/Interpretation	_____
	Music reading skills	_____
	Musical work habits	_____

- B.** Positive attitude \_\_\_\_\_
- Respects teachers \_\_\_\_\_
- Respects peers \_\_\_\_\_
- Respects property of others \_\_\_\_\_
- Works well with others \_\_\_\_\_
- Curious, seeks out knowledge \_\_\_\_\_
- Accepts constructive criticism \_\_\_\_\_
- Responsible/mature \_\_\_\_\_
- Leadership skills \_\_\_\_\_

**C.** Optional: Additional comments. Use the other side of this form or a separate sheet if you need more room.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Thank you for taking the time to complete this application. We appreciate your support.**

**Send to : Abby Aska  
aaska0612@gmail.com**

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