

**Warren County Community Singers  
Scholarship Committee  
P.O. Box 394  
Belvidere, NJ 07823**

**MUSIC SCHOLARSHIP APPLICATION**

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

MUSIC TEACHER: \_\_\_\_\_ PHONE: \_\_\_\_\_

I HAVE BEEN ACCEPTED AS AN INCOMING FRESHMAN AT A COLLEGE OR  
UNIVERSITY: YES OR NO (circle one) *PLEASE PROVIDE PROOF OF MATRICULATION*

NUMBER OF YEARS STUDYING MUSIC? \_\_\_\_\_

I HAVE BEEN INVOLVED WITH THE FOLLOWING MUSICAL ACTIVITIES OUTSIDE  
OF SCHOOL. (*ORCHESTRAS, PLAYS, CHURCH CHOIR, AREA GROUPS, ETC.*)

\_\_\_\_\_

\_\_\_\_\_

I HAVE ACHIEVED THE FOLLOWING RECOGNITION OR ACHIEVEMENT IN MUSIC.

\_\_\_\_\_

\_\_\_\_\_

I HAVE ALSO BEEN INVOLVED IN THE FOLLOWING OTHER ACTIVITIES: I.E.  
SPORTS, CLUBS, JOBS, VOLUNTEER WORK, ETC. HOW LONG IN EACH ACTIVITY?

\_\_\_\_\_

\_\_\_\_\_

REPERTOIRE: 2 SELECTIONS, PLEASE LIST THE PIECES AND COMPOSERS BELOW:

1. \_\_\_\_\_

2. \_\_\_\_\_

ACCOMPANIST NEEDED FOR AUDITION: YES \_\_\_\_\_ NO \_\_\_\_\_

*PLEASE ENSURE THAT YOU HAVE READ ALL THE SCHOLARSHIP GUIDELINES, AND BE SURE TO ATTACH YOUR ESSAY TO THIS FORM.*